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ABSTRACT

The manual is intended to help Indiana secondary school principals in the delivery of special education services within their buildings. Introductory sections cover the basis of Indiana's special education law and outlines state and federal definitions of 10 handicapping conditions. The next seven sections provide administrative guidelines on the following topics (sample subtopics in parentheses): pre-referral (parent and student involvement); referrals (timelines); evaluation (a description of 41 commonly used evaluation instruments); the case conference committee and the individualized education program (least restrictive environment, mainstreaming, scheduling, extracurricular activities, grading, graduation requirements); case review; and due process (suspension, expulsion, exclusion). Two final sections provide a glossary of common special education terms and information on state and federal special education resources. (CL)

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A DESK REFERENCE MANUAL

on Special Education for School Principals

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Indiana School for the Deaf

Indiana State Board of Health
Protection and Advocacy Service Commission for the Developmentally Disabled
Silvercrest Children's Development Center

Federal Special Education
Association for Children with Learning Disabilities (ACLD)
Council for Exceptional Children (CEC)
National Association for Retarded Citizens (NARC)
National Association of State Directors of Special Education
National Inservice Network

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INTRODUCTION

The Leadership Training Grant, housed in the Department of School Administration at Indiana University, supports pre- and inservice education programs. Inservice education programs must be based upon assessed needs of participants. Therefore, beginning May 1979, telephone interviews were conducted by Indiana University graduate students. In cooperation with the Indiana Secondary School Administrators (ISSA), these interviews were conducted to determine some of the "greatest problems" that secondary principals face regarding special education programs and services. At that time, a large percentage of the principals identified issues regarding procedures as their greatest concern. Other concerns included mainstreaming, parent involvement and communication.

The elementary guide served as frame of reference for the development of this manual. Five two-person teams of administrators in secondary schools and special education were called together to critique the idea of a Principal Desk Reference Manual—Elementary Edition. Besides the obvious wording and references, this group recommended additional sections such as expulsion, vocational education, grading and ways regular and special education teachers interact with one another.

With their input the Secondary Team proceeded to complete a draft of the manual, which was returned to the five principals and five directors for their substantive review. Before the final draft was prepared for distribution, the Secondary Team again convened the original group of ten. Their comments were incorporated into the final draft. This Manual, then, is grounded in a secondary context.

We believe that both the content and process of development were collaboratively determined by both regular and special education leadership personnel. We also believe that successful educational programming for all students will occur if the same respect and cooperation we have received follows in each Indiana school corporation. We hope that this desk reference will be used by principals in the State of Indiana as both a guidebook and information source as they collaborate in the implementation of programs and services for special education students within their buildings.

The Administration Leadership Training Grant in the Department of School Administration at Indiana University (OE Grant G007901209) is funded by the Department of Education, Office of Special Education/ Rehabilitative Services through the Division of Personnel Preparation.

Section 1

Philosophy and Purpose

1.1 Constitutional Implications of ISSA

1.2 Purpose of Desk Reference Manual

Section 1

PHILOSOPHY AND PURPOSE

1.1 CONSTITUTIONAL IMPLICATIONS OF ISSA

As stated in its constitution, two of the purposes of the Indiana Secondary School Administrators are:

> *"to promote the study of the professional problems for the purpose of continually improving the standards and the practices of secondary education"* (Section 3A)

AND

> *"to further, through cooperative effort, the policies and program of other agencies having to do with education"* (Section 3B)

It is with the intent of fostering an increased awareness and understanding by secondary school administrators of the provision and procedures in Rule S-1 and its federal counterpart, P.L. 94-142, that this desk reference manual was compiled with the cooperation of ISSA and the Administration Leadership Training Grant in the Department of School Administration at Indiana University.

In advancing the equal opportunity for education of all secondary students within Indiana, it is anticipated that the desk reference manual will be a useful guidebook and source of information for Indiana's secondary school administrators.

1.2 PURPOSE OF DESK REFERENCE MANUAL

The major purpose of this desk reference is to act as a guide to assist secondary principals in the delivery of special education services within their buildings. Hopefully, this reference will serve to provide information, clarify questions and give guidance to the secondary principal.

In utilizing this document, it should be remembered that cooperative and district forms, policies and procedures take precedence over any information provided in this booklet. There are many cooperative and district procedure manuals available in the State of Indiana that do an exemplary job in describing relevant services and program descriptions for special education to their constituency.

With this information in mind, it is hoped that this reference guide will act as a service to principals and others throughout the state.

SECTION 2

Basis of the Law

2.1 Special Education and Indiana's Rule S-1

2.2 Public School's Basic Responsibilities

2.3 Parent's Basic Responsibilities

Section2

BASIS OF THE LAW

2.1 SPECIAL EDUCATION AND INDIANA'S RULE S-1*

Indiana's Rule S-1 provides for special education programs and related services without charge by the public schools of Indiana, including the Indiana State School for the Blind, the Indiana State School for the Deaf and Silvercrest Children's Development Center.

Special Education is defined as specially designed instruction in order to meet the unique needs of a handicapped student.

Related services are those services required to assist a handicapped student in benefiting from special education, including:

Transportation
Audiology
Physical therapy
Occupational therapy
Medical services for diagnostic or evaluation purposes
Counseling services
Psychological services
Recreation
Early identification and assessment
School health services
School social worker services
Parent counseling and training.

2.2 PUBLIC SCHOOL'S BASIC RESPONSIBILITIES

To provide a free appropriate public education (FAPE) for handicapped students between ages 6-18;

To provide appropriate special education programs and related services for kindergarten-aged handicapped children if the public school provides regular education programs for kindergarten-aged children;

To provide an individualized education program (IEP) for every handicapped student in need of special education and related services;

To assure that testing and evaluation materials, procedures and interpretation of results are not biased;

To educate handicapped students within the least restrictive environment appropriate to meet the student's needs (see definition of this term and its relation to mainstreaming, p. 66);

To protect the confidentiality of student's education records;

To conduct a comprehensive search to identify, locate and evaluate each handicapped child from birth through age 21;

To protect the rights of students and parents by providing all procedural safeguards of due process.

* *A Parent Citizen Handbook: A Guide to the Education of Handicapped Children and Youth.* Indianapolis, IN: Indiana Department of Public Instruction, Division of Special Education, H. H. Negley, Superintendent, 1979.

Although not required by Indiana law, the public school may provide programs for handicapped children ages 3 to 5 and 19 to 21, and for hearing-impaired children as young as six months.

2.3 PARENT'S BASIC RESPONSIBILITIES

The parents' basic responsibilities in securing a free appropriate public education for their handicapped child are:

To give consent for individual educational evaluation and placement of their child;

To participate in the Case Conference Committee (CCC), which includes the development and writing of their child's individual education program;

To cooperate with the school, including attendance at the Annual Case Review, to make certain the individualized education program continues to be appropriate and is followed.

Rule S-1 provides a starting point for assuring that every handicapped student receives a free appropriate public education. For the rule to be most effective in helping handicapped students develop to their fullest potential, it must be implemented with the cooperation of:

Parents

Teachers

Specialists

School administrators

Community agencies (including private)

The process of developing an appropriate program for each student is sometimes complex. To avoid misunderstandings, both the parents and designated school representative should keep a record of the various phone calls, meetings, and decisions that occur throughout the process.

Section 3

Handicapping Conditions

Introduction

3.1 Communication Handicaps

3.2 Seriously Emotionally Disturbed

3.3 Hearing Impaired

3.4 Multiply Handicapped

3.5 Mentally Handicapped

3.6 Physically Handicapped

3.7 Learning Disabled

3.8 Visually Handicapped

3.9 Deaf-Blind

3.10 Other Health Impaired

This section is divided into the following types of handicapping conditions as provided in Rule S-1 and Public Law 94-142 (P.L. 94-142).

3.1 Communication Handicaps
3.2 Seriously Emotionally Disturbed
3.3 Hearing Impaired
3.4 Multiply Handicapped
3.5 Mentally Handicapped
3.6 Physically Handicapped
3.7 Learning Disabled
3.8 Visually Handicapped
3.9 Deaf-Blind
3.10 Other Health Impaired.

Sub-Section A

The subsection provides definitions for each handicapping condition found in both P.L. 94-142 and Indiana Rule S-1.

Sub-Section B

This subsection provides identifying characteristics for each handicapping condition. These identifying characteristics are not all-inclusive, but provide general guidelines to assist in recognizing the handicapping conditions. When utilizing this section, attention should be given to consistent patterns of behaviors, not isolated instances.

Sub-Section C

This subsection provides a general description of each special education program area. The programs may vary slightly from district to district. However, the information provided will give an idea of the type of program which may be available for students.

3.1 COMMUNICATION HANDICAPS

A. Definitions

1. *P.L. 94-142.* Communication handicaps include a communication disorder, language impairment, impaired articulation or voice impairment which adversely affects a student's educational performance.

2. *Rule S-1.* Communication handicaps may include deficits in:

Articulation—includes all speech deviations based primarily on incorrect production of speech sounds and may result from organic conditions or be non-organic, or functional. . . includes omissions, substitutions, and/or distortions of speech sounds within words);

Fluency—(includes speech deviations commonly referred to as stuttering and those which involve an abnormal rate of speech);

Voice—(includes three major types of deviations having to do with the sound of the voice: pitch, loudness and quality);

Language—(includes deviations in receptive, integrative and expressive functions).

B. Identifying Characteristics*

1. Is the student's speech unclear and difficult to understand?

2. Does the student stutter?

3. Is there anything unusual about the student's rate, pitch, and/or quality of speech?

4. Is it difficult for the student to comprehend what you are saying?

5. Does the student speak or answer in one or two word sentences?

6. Does the student have difficulty expressing his/her thoughts?

C. Program Description**

All students ages 5 through 18 with communication handicaps will be offered a program. Speech, hearing, and language pathologists—licensed and certified in the State of Indiana—will offer complete diagnostic speech and language evaluations, hearing evaluations, and respective referral services, consultative services and speech, hearing, and/or language therapy.

3.2 SERIOUSLY EMOTIONALLY HANDICAPPED

A. Definitions

1. P.L. 94-142. The student exhibits one or more of the following characteristics over a long period of time which adversely affects his/her educational performance, to a marked degree:

   (a) inability to learn not explained by intellectual, sensory, or health factors;
   (b) inability to build or maintain interpersonal relationships with peers and teachers;
   (c) inappropriate types of behavior under normal circumstances;
   (d) general pervasive mood of unhappiness or depression;
   (e) tendency to develop physical symptoms or fears associated with personal or school problems.

2. *Rule S-1* The student exhibits one or more of the following over a long period of time and to a marked degree: inability to learn not explained by intellectual sensory or health factors; inability to build or maintain satisfactory interpersonal relations with teachers and peers; inappropriate types of behavior in normal circumstances; general pervasive mood of unhappiness or depression; tendency to develop physical symptoms or fears associated with school or personal problems (includes autistic but not socially maladjusted).

B. Identifying Characteristics

1. Is the student hyperactive, impulsive, or easily distracted?

2. Does the student withdraw from social contact with adults and peers?

3. Does the student develop a "tic", eye blinks, or facial and body movements when confronted with a difficult situation?

4. Does the student seek an excessive amount of help and reassurance?

5. Is the student overly submissive to peers, adults, or authority?

* *Greene-Sullivan Special Education Cooperative Handbook*. Hymera, IN.

** *New Castle Area Programs for Exceptional Children*. New Castle, IN.

6. Does the student behave in a bizzare manner?

7. Does the student threaten others verbally or physically?

8. Does the student often get himself/herself into situations which may hurt or frighten him/her?

9. Does the student appear anxious and tense when confronted with school work?

10. Is the student often a scapegoat?

11. Do the inappropriate behaviors of the student interfere with academic performance?

12. What are the frequencies, intensities, and durations of the described behaviors?

C. Program Description

The program for the emotionally handicapped is a complete and comprehensive program designed to meet the educational and social needs of identified emotionally handicapped students. Programming may include consultation, instructional resource services, and/or special classes. Programming may also include intensive evaluation as delineated in Rule S-1, special classrooms and teachers, counseling for parents, liaison with physicians and mainstreaming whenever possible. In addition to the concentrated effort in dealing with the student's emotional difficulties, the general academic and social development of the students are addressed by individual instruction. The program is designed to meet the instruction, not only through the special classroom facilities and specialized instruction, but also through the training of parents.

3.3 HEARING IMPAIRED

A. Definitions

1. *P.L. 94-142.*

Deaf—The student has a hearing impairment so severe that s/he is impaired in processing linguistic information through hearing, with or without amplification; this impairment adversely affects educational performance.

Hard of Hearing—The student has a hearing impairment, permanent or fluctuating, which adversely affects his/her educational performance but which is not included under the definition of deaf.

2. *Rule S-1.* Hearing impaired includes both deaf and hard of hearing.

Deaf—The student has a hearing impairment so severe that hearing is non-functional for educational purposes.

Hard of Hearing—The student has a hearing impairment, permanent or fluctuating, which adversely affects a student's educational performance but is not included under "deaf."

B. Identifying Characteristics

1. Is there a history of hearing loss in the student's family?

2. Does the student appear to hear some things and not others?

3. Does the student have language and articulation problems which are immature for his/her age?

4. Does the student speak in either an extremely loud or an extremely soft voice?

5. Does the student have a history of ear aches or ear infections?

6. Does the student attain consistently higher scores on performance sections of achievement tests than on the verbal and written sections?

7. Does the student complain that s/he cannot hear in class?

C. Program Description

The hearing impaired program provides special consultations, instructional resource services and special classes for the hearing impaired student through age 18. The student may be placed in a classroom for the hearing impaired in a cooperative or, in some cases, placement at the Indiana State School for the Deaf in Indianapolis.

3.4 MULTIPLY HANDICAPPED

A. Definitions

1. *P.L. 94-142.* Multiply handicapped students have concomitant impairments, the combination of which causes such severe educational problems that the student cannot be accomodated in special education programs solely for one of the impairments (excluding deaf-blind).

2. *Rule S-1.* The student has two or more handicapping conditions which interact and result in problems so complex that placement in regular programs or programs designed for students with single handicaps—even with reasonable alteration, additional equipment, special training aids, and/or modified teaching techniques—will not result in significantly meaningful growth and achievement.

B. Identifying Characteristics

Specific identifying factors for multiply handicapped students are not practical due to the diversity of the population. It is important to remember that the student must display two or more handicapping conditions which result in severe disabilities. Specific identifying factors listed in the other conditions presented may be most helpful in determining the disability.

C. Program Description

A specially equipped, self-contained classroom within the public school setting, staffed with a teacher certified to teach mentally handicapped students in Indiana, will be provided for the multiply handicapped student. Only students who meet the definition of multiply handicapped and those who have completed a diagnostic-teaching evaluation shall be recommended for placement in a classroom for the multiply handicapped.

The basic skill areas from which behaviorally based individualized instructional units may be provided are: motor skills, including gross and fine motor skills; self-help skills, including toileting, washing, eating, and dressing skills; communication skills, including expressive and receptive language abilities; social skills, including establishment and reinforcement of appropriate group interaction, emotional control, and following instructions and directions; and individualized academic instruction.

In addition to the aforementioned programming, complete diagnostic and therapeutic physical therapy programming may be available to each student.

3.5 MENTALLY HANDICAPPED

A. Definitions

1. *P.L. 94-142.* The student demonstrates significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior, manifested during the developmental period, which adversely affect educational performance.

2. *Rule S-1.* The student demonstrates significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior, manifested during the period from birth through 18 years of age, which adversely affect a student's performance.

   Mildly Mentally Handicapped—more than two standard deviations below average in intelligence and adaptive behavior.

   Moderately Mentally Handicapped—more than three standard deviations below the mean in intelligence and adaptive behavior.

   Severely/Profoundly Mentally Handicapped--more than four standard deviations below the mean in intelligence and adaptive behavior.

B. Identifying Characteristics

1. Compared with the other students in class, does the student appear to be physically less mature?

2. Does the student generally have to be told more than once how to do things because of poor memory or inability to understand?

3. Does the student find it difficult to remember or retain what he/she has learned?

4. Does the student have difficulty understanding what he/she reads?

5. Does the student demonstrate immaturity in fine motor tasks such as writing or drawing?

6. Does the student have difficulty grasping and controlling the pencil when printing, writing or drawing?

7. Does the student demonstrate immaturity in his/her relationships with adults and peers?

8. Does the student appear immature in self-help skills such as using public transportation, shopping, getting around the school?

9. Does the student demonstrate inappropriate judgments in social situations?

10. Is the student able to assume responsibilities appropriate for his/her age?

11. Does it seem to take the student longer to figure out things?

12. Does the student appear awkward and clumsy in walking and in physical activity?

13. Does the student lack the ability to think and reason abstractly?

14. In comparison to peers, is the student consistently below average in *all* functional areas?

C. Program Description

1. *Mildly Mentally Handicapped.* Special classrooms, instructional resource services and special consultation provide for the sequential development of the mildly mentally handicapped student ages 5 through 18. Following the determination of eligibility and development of an individualized education program, the Case Conference Committee shall recommend the type of instruction needed from the above mentioned alternatives.

   All alternatives provide for the least restrictive environment in order to further maximize the student's total development. Class size and caseloads should consider the individual needs of each student enrolled as specific in the student's individualized education program (IEP) and the group composition. Special classes may be offered in four age groupings: primary, intermediate, junior high and high school levels.

2. *Moderately Mentally Handicapped.* The program for the moderately mentally handicapped includes classrooms staffed with instructors certified to teach mentally handicapped students in Indiana. Provisions have been made for sequential development within all grade levels of students ages 5 through 18.

   Special consultations are available in addition to the special classroom. The Case Conference Committee shall recommend the type of placement and instructional needs in addition to providing for the least restrictive environment for each student. General classroom and individualized instructional curriculum units include: self-care/self-help skills; motor development; communication skills; social skills; academic skills; and prevocational training.

3. *Severely/Profoundly Mentally Handicapped.* The program for the severely mentally handicapped includes classrooms staffed with instructors certified to teach mentally handicapped students in Indiana. Classrooms are provided in two age groupings. The general level of mental development of the severely mentally handicapped is such that s/he can learn to communicate, can learn elemental health habits and can profit from systematic habit training.

   General class and individualized instruction provide a meaningful and accountable curriculum which includes: self-help skills consisting of toileting, washing, eating and dressing; motor-skills including fine and gross motor skills as well as classroom-related motor skills; communication skills including expressive and receptive skills; and social skills consisting of group behavior, individual behavior, cooperation, emotional control and following directions or instructions. The Case Conference Committee shall recommend the type of placement and instructional needs considering the least restrictive environment appropriate for each student.

3.6 PHYSICALLY HANDICAPPED

A. Definitions

   P.L. 94-142. The student has severe orthopedic impairment (including congenital anomalies) which adversely affects educational performance.

2. *Rule S-1.* The student has orthopedic or other health problem which is found to be a serious impairment of the student's locomotion or motor function leading to an inability to function in the regular school program or demanding a need for greater protection than provided by the regular school program.

B. Identifying Characteristics

   Does the student have any physical or health impairment that in any way interferes with his/her performance in the classroom?

C. Program Description

Following determination of eligibility and development of an individualized education program, the Case Conference Committee shall recommend appropriate placement after considering the nature and severity of the handicap and the type of needed instruction. Placement shall be made for educational purposes. The alternatives to be considered may include the following: regular classroom with resource room, resource room, and special classes for the physically handicapped. Appropriate and adequate equipment shall be provided in the least restrictive environment appropriate in order to maximize the student's total development.

3.7 LEARNING DISABLED

A. Definitions

1. *P.L. 94-142.* A learning disability is a disorder in one or more of the basic psychological processes involved in understanding or using language, spoken or written, manifesting itself in imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. The term includes perceptual handicaps, but excludes problems resulting from sensory impairments, mental retardation, emotional disturbance or from environmental, cultural, or economic disadvantage.

2. *Rule S-1.* A learning disability consists of severe specific defects in perceptual, integrative or expressive processes which severely impair learning efficiency. The term learning disability includes conditions which have been referred to as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia and may be manifested in disorders of listening, thinking, talking, reading, writing, spelling or arithmetic. It does not include learning problems which are due primarily to visual, hearing, or motor handicaps, to mental retardation, emotional disturbance, or to environmental disadvantages. Students enrolled in programs for the learning disabled shall be those who are chronic failures in the regular classroom setting and are seriously deficient in educational skills.

B. Identifying Characteristics

1. Does the student have difficulty understanding and integrating writing and language?
2. Can the student learn from listening, but not from reading?
3. Is writing cramped, crowded, and laborious?
4. Does the student grasp concepts of numbers, space or time?
5. Does the student exhibit overactive, uncontrolled, or impulsive behavior?
6. Does the student show inability to concentrate or have a short memory span?
7. Is the student frequently tired, or lack energy or strength?
8. Is the student easily distracted by extraneous noise or movement?
9. Does the student's behavior unusually vary from day to day?
10. Can the student verbally express himself/herself far above his/her written level?
11. Can the student perform tasks with objects far better than his/her verbal abilities would indicate?

12. Can the student perform verbally far better than s/he can with tasks concerning objects?

13. Does the student have difficulty in finding his/her way or locating objects?

14. Can the student follow written instructions but not verbal ones?

15. Does the student have problems in determining similarities and differences?

16. Is the student clumsy or awkward?

17. Does the student exhibit signs of an imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations?

18. Do the academic and performance behaviors seem erratic?

C. Program Description

The learning disabilities program provides special classrooms, diagnostic teaching resource services, and special consultation services for the sequential development of the learning disabled student ages 5 through 18. All alternatives shall provide the student with the least restrictive educational environment. The major goal of the program is to identify through educational, medical, and diagnostic teaching methods, the specific learning deficiencies of each student in the program and assist the regular classroom teacher in dealing with the student educationally.

3.8 VISUALLY HANDICAPPED

A. Definitions

1. *P.L. 94-142.* The student has a visual impairment which, even with correction, adversely affects a student's educational performance. Both blind and partially sighted are included.

2. *Rule S-1.* Both blind and partially sighted are included:

Blind—a visual loss after correction so severe that for educational purposes vision cannot be used as a major channel of learning.

Partially Sighted—vision after correction deviates from normal to such an extent that the student can benefit from the special education facilities and materials provided for partially sighted students. However, the student is able to use vision as the principal means of learning.

B. Identifying Characteristics

1. Does the student have trouble reading written work on the chalkboard?

2. Does he/she lean very close to the material when reading at his/her desk?

3. Does the student rub his/her eyes, blink often or have other unusual mannerisms that might indicate visual difficulties?

C. Program Description

Special consultations and instructional resource services provide for the educational development of the visually handicapped student ages 5 through 18. All alternatives provide for the least restrictive environment in order to further maximize the student's total development. Students who have been identified as visually handicapped will be educated in the local education agency unless one of the following conditions in Rule S-1 exists:

1) The parent of a visually handicapped child expresses a preference that the child attend the Indiana School for the Blind.

2) The comprehensive plan for serving visually handicapped students in the resident school or joint services cooperative is not approved by the Department of Public Instruction because of inability to provide a comprehensive program according to the "Guidelines for Comprehensive Planning."

3) It is the considered opinion of an attending physician, the parent, the school and the administration of the Indiana School for the Blind, that the child should be placed in the Indiana School for the Blind.

3.9 DEAF-BLIND

A. Definitions

1. *P.L. 94-142.* The student has concomitant hearing and visual impairments, the combination of which causes such severe communication, other developmental and educational problems that they cannot be accommodated in special education programs solely for the deaf or blind.

2. *Rule S-1.* No specific corresponding category is defined; the deaf-blind category is included in the multiply handicapped category.

B. Identifying Characteristics

See identifying characteristics in Section 3.4: Multiply Handicapped

C. Program Description

See program description in Section 3.4: Multiply Handicapped.

3.10 OTHER HEALTH IMPAIRED

A. Definitions

1. *P.L. 94-142.* The student demonstrates limited strength, vitality, or alertness due to chronic or acute health problems which adversely affect educational performance.

2. *Rule S-1.* The other health impaired category is included in the physically handicapped category.

B. Identifying Characteristics

See identifying characteristics in Section 3.6: Physically Handicapped.

C. Program Description

See program description in Section 3.6: Physically Handicapped.

Section 4

Pre-Referral

4.1 Principal Involvement

4.2 Teacher and/or Counselor Involvement

4.3 Parent Involvement

4.4 Student Involvement

Section 4

PRE-REFERRAL

A variety of attempts to help the student precedes any involvement in the special education area. Pre-referral is an informal process which often involves individual staff members who work with the student and/or others who may provide alternatives for solving the problem. The purpose for this informal pre-referral review is to attempt to solve the problems so that formal referral may not be used unnecessarily.

4.1 PRINCIPAL (OR DESIGNEE) INVOLVEMENT

A. Has pertinent information been gathered about the student?

1. Cumulative record
2. Teacher information
3. Health information
4. Parent contacts
5. Previous testing
6. Current academic record
7. Student

B. Has appropriate supportive staff been involved in helping the student?

1. Guidance counselor
2. Remedial reading teacher
3. School nurse
4. Former teacher and/or special education personnel
5. Other individuals
6. Attendance officer

C. What alternatives beyond the regular classroom have been tried?

1. Tutoring
2. Change of classroom
3. Special privileges
4. Curriculum modifications
5. Special materials
6. Other

D. Have the teachers been given suggestions and support in working with the students?

E. Have you met personally with the parents or made telephone contacts?

F. Has a record been kept of specific attempts to help the student?

1. Contacts
2. Observations
3. Teacher contacts
4. Phone calls
5. Date, time of actions.

G. Have you coordinated the activities of all the professional staff involved?

H. Have appropriate meetings, conferences been held to improve communication and individual efforts?

I. What has been done to involve the parents, teachers, and other staff?

J. Are any conflicts anticipated?

4.2 TEACHER AND/OR COUNSELOR

A. What techniques have been used to program for the student?

B. How has individualized instruction been provided?

C. What behavior management programs have been used?

D. What tests and informal assessment instruments have been used to evaluate the present level of performance?

1. Teacher made tests
2. Standardized tests (group)
3. Criterion reference tests
4. Structured observation
5. Base line performance date

E. Has the cumulative record been searched for pertinent information about the student?

F. Has there been previous psychological testing?

G. Are there medical, physical concerns?

H. When was the parent alerted to these concerns?

4.3 PARENT INVOLVEMENT

A. What provisions have been made to involve the parent?

B. Do the parents seem to understand the student's present performance level?

C. Do the parents seem to understand any behavioral, physical, emotional, or learning concerns?

D. Have the parents been provided with adequate information at parent-school conferences?

E. Have the parents been given an opportunity to make suggestions and provide information to help the student?

F. Have the suggestions been implemented? Which ones?

G. Have the parents been invited to observe the student?

This team process involved a time commitment from all members. Once all alternatives have been attempted to help the student, special education services may nor may not be considered. Special education services are considered only if all alternatives fail to meet the needs of the individual student. If special education referral is indicated, a timeline is offered in Section 5.

4.4 STUDENT INVOLVEMENT

A. What provisions have been made to involve the student?

B. Does the student understand his/her present level of performance?

C. Has the student been provided with adequate feedback?

D. Has the student been given an opportunity to make suggestions and provide information?

E. Have the suggestions been implemented? Which ones?

Section 5

Referrals

5.1 Timeline

5.2 Overview

Section 5

REFERRALS

5.1 TIMELINE

The following timeline has been compiled to assist you in making decisions about the referral process:

Pre-referral activities	indefinite
Referral Parent Interview Parent Consent Evaluation Case Conference Committee meets	within 40 school days
IEP placement recommendation sent to Superintendent or designee (Supervisor of Special Education)	within 10 school days
Superintendent receives report Superintendent notifies parent of recommended placement	within 10 school days
Parent consents to placement Program implemented	within 20 school days
Annual Case Review	once each year
Re-evaluation	every three years

5.2 OVERVIEW

Referrals* (PLEASE CONSULT YOUR DISTRICT'S PROCEDURES: FILL IN THE BLANKS WITH THE NAMES OF THE APPROPRIATE PERSONS IN YOUR DISTRICT OR BUILDING)

A. Students who have trouble walking, talking, seeing, hearing or learning may have special needs and thus, suspected of having a handicapping condition. Some of them will need special education programs, but many of these students will simply need the opportunity to participate in regular educational programs provided by the school. Each public school has procedures for determining a student's needs. When a student is having difficulty in school, specialists, teachers, and parents may cooperate to make changes in the student's regular program, materials or instructional techniques to attempt to solve the difficulties.

* A parent citizen's handbook, op. cit.

B. If regular education procedures do not adequately meet the student's special needs, the student should be referred for an educational evaluation. The referral process may be started by the student, the parents, a teacher, a school administrator or specialized school personnel, as follows:

1. A referral for evaluation form is obtained from _____.

2. The referral for evaluation form is completed, dated and returned to the _____

_____.

C. _____ then has a personal interview with the parents. During the personal interview, the school representative:

1. explains that a request has been made for the student to be evaluated

2. explains the reasons for the referral

3. tells the parents:

   a. what the school has done in the past to try to help the student and the results of that assistance
   b. that the parents' permission must be given before the student is tested
   c. what testing is planned and what information will be gathered for the evaluation
   d. when the evaluation will take place
   e. that a case conference committee meeting will be held within 40 schools days of the date on the referral for evaluation form
   f. what alternatives are available for the student.

D. A written notice will be provided to the parents, listing all of the rights available to the student and parents, some of which are:

1. The right to have the evaluation done in a way that is not biased;

2. The right to have the student tested by professional persons outside the school system at the parents' expense and to have that evaluation considered by the school;

3. The right to request an independent evaluation at the school's expense if the parents disagree with the school's evaluation;

4. The right to examine and copy all of the student's school records;

5. The right to have the student's education records treated in a confidential manner, including the right to amend the records;

6. The right to request a hearing before an independent hearing officer if the parents object to the planned evaluation;

7. The right to contact other agencies or organizations for additional information about evaluations;

8. The right to have the student educated in the least restrictive educational environment which is appropriate to meeting the student's needs.

E. The parents must decide whether or not to give written consent for evaluation.

1. If written consent is given, the school proceeds with the evaluation.

2. If written consent is not given:

   a. the parents should indicate in writing that they object to an evaluation at this time;
   b. the school has the right to request a hearing to show an evaluation should be conducted;
   c. the school may obtain the services of CINS (Children in Need of Services);
   d. the school may offer resources, including names of other parents, to the parents of the student for consultation and assistance; or
   e. the school may send a social worker or guidance counselor to the parents' home to confer with them.

F. In order to become fully informed before making a decision, the parents or student may wish to study the written documents, ask questions about their meaning and talk to other parents or to other students who have been involved in the evaluation process.

G. Summary of Parent Interview Process*

1. Contact parents for a personal interview to obtain permission for individual evaluation.

2. Explain reason for referral.

3. Give parents copy of appropriate request for psychological services form.

4. Explain type of testing and by whom, and when results will be available.

5. Obtain parental approval for evaluation.

   a. indicate to parents that they may take the form to think about or may sign immediately;
   b. mark on referral where they are to sign in agreement or disagreement;
   c. an in-person interview at school or at the parent's home is preferable. (A telephone interview with mailing of appropriate forms and cover letter is permissable when person-to-person contact cannot be arranged.)

6. Obtain information from the parent to help the school understand the educational program for the student.

   a. information about the student's performance in a variety of settings
   b. information about possible causes of handicapping condition:
      1. congenital
      2. genetic
   c. information about personal situational crisis which might affect the student's behavior

* Marion Community Schools, Marion, IN.

Section 6

Philosophy and Purpose

6.1 Educational Evaluation

6.2 Participants In Evaluation Process

6.3 Common Evaluation Instruments

6.4 Evaluation Information

Section 6

EVALUATION

6.1 EDUCATIONAL EVALUATION: AN OVERVIEW:

An evaluation can help the parents and the school to know (1) how the student learns best; (2) which skills need to be strengthened or developed; and (3) the student's unique problems. An educational evaluation is required before the decision can be made regarding whether or not a student should be placed in special education.

A. The student's evaluation includes *many different activities, tests and procedures,* such as:

1. observations and interviews
2. physical examination (if needed)
3. the student's developmental history
4. tests

B. The evaluation is conducted *to find:*

1. the student's strengths
2. the student's current performance level
3. the student's educational needs

C. The evaluation must be nonbiased by providing:

1. a variety of procedures, which gives a fair and complete picture of the student's abilities;
2. tests and procedures which take into account the nature of the student's handicap, native language and cultural background.

D. Evaluations must be conducted at least every three years, and more frequently, if necessary. A reevaluation may be requested at any time by the parents or school staff.

E. If the parents disagree with the school's evaluation, the parents may request an independent evaluation at the school's expense by contacting the school's Director of Special Education. The director will also provide necessary information regarding agencies or individuals offering independent evaluations. The school:

1. may or may not agree to pay for an independent education evaluation
2. will consider independent evaluations at the parents' expense.

6.2 PARTICIPANTS IN EVALUATION PROCESS

An educational evaluation must be completed by a team of people; requiring members include a psychometrist or psychologist, a representative of the school (principal or designee), and the student's teacher. Although these members are required, frequently other members are involved in the multidisciplinary evaluation process. An outline of the types of involvement for members is provided below:

A. Principal or Designee

(PLEASE CONSULT YOUR DISTRICT PROCEDURES) In many districts, the principal is responsible for assuring that the timelines offered in Rule S-1 are followed. It is also possible that the principal may have specific information regarding the strengths and weaknesses of individual students. Additionally, the principal suggests specific professionals to participate in the evaluation process. (WRITE IN THE PERSON RESPONSIBLE IN YOUR BUILDING)

_____

B. Regular and/or Special Education Teachers

In the evaluation process, teachers contribute valuable information regarding the present level of performance of individual children. Both formal and informal instruments are used by teachers to report this information. Academic and social classroom behaviors are primary sources of information acquired through teachers.

C. Parent

The parent(s) of the student can offer valuable evaluation information regarding the student's progress at home. Input from the parent may include relations with peers and siblings, relations with parents and other adults, capabilities to perform required tasks at home, and special interests of the student. This information is valuable for an "outside of the classroom" inventory of the students' strengths and weaknesses.

D. Student

The adolescent student can offer valuable evaluation information regarding his/her educational problems and needs. Student interviews throughout the evaluation process may yield substantial information. The student is often able to identify learning and academic strengths and weaknesses once rapport has been established and the referral and evaluation process has been explained to him/her. By talking to the student, it may be possible to identify additional intervention strategies.

E. Psychological Services

Psychometrists and psychologists serve as consultants to parents, teachers and administrators concerning individual needs of students at the elementary and secondary levels. These students include both those served in special education programs and those in the regular classroom program. Consultation services provide parents, teachers and administrators opportunities for exploring alternative methods of dealing with specific learning and/or behavioral problems and typically do not include student testing.

Individual student psychoeducational evaluations are also provided upon receiving parent permission. Results of evaluations are shared in a case conference with parents, teachers and other school personnel who work with the student, and together the group develops recommendations for meeting the educational needs of the student. Psychoeducational evaluations are regularly conducted every three years for all students in special education programs.

Consultations or individual student evaluations sometimes result in referrals to appropriate outside agencies for individual or family therapy. Psychometrists/psychologists provide liaison with community agencies in order to better coordinate services provided to students and families.

F. Speech, Language and Hearing Services

A hearing screening service is provided by speech, language, and hearing clinicians with particular emphasis placed on referred students or those students previously identifed as having a known hearing loss.

G. Physical Therapy (PT) Services (CONDUCTED ONLY UNDER PHYSICIAN'S ORDER)

A physical therapist provides teacher implemented services relating to the planning and administering of medically prescribed therapy treatment for students in order to restore function, relieve pain, and/or prevent disability following congenital defects, disease, injury or loss of body part. This will be done by reviewing and evaluating the physician's prescription and the student's medical records to determine the treatment program. Further, the physical therapist will perform the patient tests, measurements and evaluation (i.e., range of motion and manual muscle tests, gait and functional analyses, and body parts measurements). The therapist will record and evaluate findings to aid the physician in establishing or revising specifics of the treatment program.

H. Occupational Therapy (OT) Services (CONDUCTED ONLY UNDER PHYSICIAN'S ORDER)

An occupational therapist provides services relating to therapist-directed, teacher-implemented, classroom programming. Evaluation and training is provided in the areas of gross and fine motor function, self-care, and sensory and perceptual-motor integration with the intent of strengthening the student's ability to function as independently as possible. In addition, remedial techniques include the design, fabrication and adaptation of materials, equipment and the educational environment.

I. Other

1. Medical Examination (by physician)
2. School Social Worker Evaluation
3. Adaptive Physical Education Evaluation
4. Input from counselor
5. Input from assistant principal

(There are additional resources to assist you with this process; see Section 5: REFERRALS)

6.3 COMMON EVALUATION INSTRUMENTS

6.3.1 Categorized List of Titles

Comprehensive Assessment Systems

Woodcock-Johnson Psycho-Educational Battery
Brigance Diagnostic Invenstory of Essential Skills
System of Multicultural Pluralistic Assessment

Achievement and School Performance

- Wechsler Intelligence Scale for Children-Revised
- Wechsler Adult Intelligence Scale
- Stanford-Binet Intelligence Scale
- Slosson Intelligence Scale
- Leiter Performance Scale
- Culture Fair Intelligence Test
- Peabody Individual Achievement Test
- Wide-Range Achievement Test

School Performance

- Spache Diagnostic Reading Scales
- Gray Oral Reading Test
- Silvaroli Classroom Inventory
- Woodcock Reading Mastery Tests
- Gates McKillop Reading Diagnostic Test
- Gates McGinitie Reading Test
- Key Math Diagnostic Test
- Stanford Diagnostic Mathematics Test
- Test of Written Spelling
- Test of Written Language
- Peabody Picture Language Test
- Test of Adolescent Language

Learning Style/Perceptual Skills

- Detroit Test of Learning Aptitude
- Slingerland Screening Test
- Lindamood Auditory Conceptualization Test
- Goldman-Fristoe-Woodcock Test of Auditory Discrimination
- Goldman-Fristoe-Woodcock Auditory Skills Test Battery
- Berry Developmental Test of Visual-Motor Integration
- Bender Visual-Motor Gestalt Test
- Draw-A-Person or Goodenough—Harris Drawing Test
- Bruininks-Oseretsky Test of Motor Proficiency

Behavior

- AAMD Adaptive Behavior Scale
- Vineland Social Maturity Scale
- Devereux Adolescent Behavior Rating Scale
- Behavior Rating Profile
- Piers-Harris Children's Self-Concept Scale
- Mooney Problem Checklist

Vocational/Career Interest

- AAHD-Becker Reading Free Vocational Interest Inventory
- Wide Range Interest-Opinion Test
- Minnesota Vocational Interest Inventory

6.3.2 Alphabetical Listing, with Descriptions

PLEASE NOTE:	This list was not meant to be exhaustive; it is a collection of those evaluation instruments most frequently used in schools today. For additional information on these tests and other appropriate for the secondary level student, refer to: *The Eighth Mental Measurements Yearbook,* Ed Oscar and Krisen Buros, The Gryphon Press, Highland Park, NJ., 1978, volumes 1 and 2.
AAMD Adaptive Behavior Scale	A scale which rates student in 24 different areas such as: independent functioning, physical and language development, economic activity, etc. (ages 3-adult)
AAMD-Becker Reading-free Vocational Interest Inventory (R-FVII)	A non-reading vocational preference test for use with mentally retarded persons, particularly the educable mentally retarded at the high school level. The instrument provides scores in both male and female interest areas. (high school)
Behavior Rating Profile (BRP)	A standardized instrument designed to identify pupils with behavior problems. Overall perceptions of teachers, parents, the student, and peers may be contrasted; also, it is possible to compare the student's behavior in different settings (grades 1-7).
Bender Visual-Motor Gestalt Test	A test which requires the student to copy nine single line drawings on a blank sheet of paper. It is designed to evaluate perceptual maturity, neurological impairment, and emotional adjustment. (ages 4-adult)
Beery Buktenica Developmental Test of Visual Motor Integration (VMI)	A test which measures the integration of visual perception and motor behavior. The student copies geometric forms from a stimulus card (ages 2-15).
Brigance Diagnostic Inventory of Essential Skills	A secondary level criterion-referenced test which covers basic academic and functional skills for independent living. In addition to reading, mathematics, and spelling, there are problems for health and safety, vocational, money and finance, travel and transportation, food and clothing, and communication and telephone skills. It provides instructional objectives and includes a record-keeping system. (grades 7-12)
Bruininks-Oseretsky Test of Motor Proficiency	A kit which includes everyday items which a student must manipulate in a number of ways to demonstrate speed and efficiency in both fine and gross motor planning and performance (ages 4-16).
Culture Fair Intelligence Test	Nontraditional intelligence scales which measure general mental ability, and consist entirely of figural analogies and figural reasoning items. They are designed not to be contaminated by the effects of prior learning or past formal instruction. Behaviors samples: seriation, classification, matrix-completion, etc. Scale 2 (8-14 years) and Scale 3 (14 years +) are applicable.
Detroit Test of Learning Aptitude	A battery of nineteen subtests which relate cognitive abilities to areas of learning. It yields a detailed profile of a student's abilities and deficiencies (ages 3-adult)

Devereux Adolescent Behavior Rating Scale (DAB)	A scale designed for use by parents which rates the student according to how often and to what degree twelve negative behaviors occur. Examples: defiance, dependency, emotional distance, etc. (ages 13-18)
Draw-A-Person or Goodenough-Harris Drawing Test (DAP)	A pencil and paper test which requires the student to draw a whole person. It is scored for 73 characteristics on a standardized basis. (grades K-10)
Gates McGinitie Reading Test	A series of norm-referenced group-administered screening tests assessing skill development in reading. There are eight educational levels, covering these reading areas: vocabulary, comprehension, and speed/accuracy. (grades 1-12)
Gates McKillop Reading Test	A collection of norm-referenced tests that assess the following reading skills word recognition, vocabulary, letter sound, letter names, blending, syllabication, sequencing, and discrimination. The test does not include comprehension abilities. (grades 1-7)
Goldman-Fristoe-Woodcock Auditory Skills Battery	A battery which contains thirteen subtests which tap four different auditory areas: attention, discrimination, memory, and sound-symbol association. (ages 3-adult)
Goldman-Fristoe-Woodcock Test of Auditory Discrimination	An individual test of ability to discriminate speech sounds in quiet and in noise. (ages 4-adult)
Gray Oral Reading Test	A series of standardized oral reading paragraphs which are scored for speed, accuracy, and comprehension. (grades 1-12)
Key Math Diagnostic Test	An individually administered test designed to provide a diagnostic assessment of skill in mathematics. Organized into three major areas: content, operations, and applications (grades K-7).
Leiter International Performance Scale (LIPS)	An untimed nonverbal general intelligence scale which requires absolutely no verbal instructions or responses. Behaviors samples include: discrimination, generalization, sequencing, analogies, and picture completion. (ages 2-18)
Lindamood Auditory Conceptualization Test (LAC)	A sequencing and discrimination test which measures auditory skills associated with spelling and reading. (grades K-12)
Minnesota Vocational Interest Inventory (MVII)	An inventory designed specifically to discover nonprofessional occupational interests of adolescent males. The student must choose most and least preferred items in areas such as: mechanics, health, sales, clerical work, electronics, etc. (ages 15+)
Mooney Auditory Checklist	A list of 330 possible problems in the following areas: health, finances, relationships, etc. The student is asked to read through and underline any which are troubling him/her. The severity of the concern is then determined from an interview. (grades 7-9, 9-12, and above)

Peabody Individual Achievement Test (PIAT)	A wide-range screening measure designed to assess specific academic skills in areas of reading, spelling, math, and general information; requires pointing responses. (grades K-12)
Peabody Picture Vocabulary Test (PPVT)	An individually administered vocabulary test which has the student choose the appropriate picture when given a stimulus word. It is designed to give an estimate of the student's verbal intelligence through the measurement of his hearing vocabulary. (ages 2-18)
Piers-Harris Children's Self-Concept Scale	A test which consists of eighty first person declarative statements of the following type: "I am smart" or "I give up easily". The student responds "yes" or "no". (grades 3-12)
Silvaroli Classroom Inventory	A quick reading inventory composed of three parts: graded word lists, graded oral paragraphs, and a graded spelling survey. (grades 2-10)
Slingerland Screening Test	A group administered screening instrument composed of eight subtests which indicate problems in any of the following perceptual areas: motor, auditory, or visual. It can be used to identify student weaknesses and ascertain a student's strong modalities. (grades K-8)
Slosson Intelligence Test (SIT)	A brief individual test of verbal intelligence which stresses mathematical reasoning, vocabulary, auditory memory, and information. (ages 4-adult)
Spache Diagnostic Reading Scales	A series of tests designed to evaluate oral and silent reading skills including word recognition, phonics, and comprehension. (grades 1-8)
Stanford-Binet	An individually administered verbal intelligence test which reports performance in six categories: general comprehension, arithmetic reasoning, concentration and memory, vocabulary and fluency, judgment, and reasoning; yields a mental age and an IQ score. (ages 2-18)
Stanford Diagnostic Mathematics Test	A four-level norm-referenced standardized test of math concepts and skills designed for group administration. There are three areas covered on all levels: number systems and numeration, computation, and applications. Instructional objectives are provided for each of the test items. (grades 2-12)
System of Multicultural Pluralistic Assessment (SOMPA)	A battery of nine different tests designed to provide information about the learning potential of students from different and sociocultural backgrounds and ethnic groups. It contains three types of measures: medical, social system, and pluralistic. Assessment consists of both parent interviews and direct testing of pupils. (ages 5-11)
Test of Adolescent Language (TOAL)	A comprehensive measure of adolescent language. The test allows comparison of communication skills across several dimensions: receptive vs. expressive, spoken vs. written, and reading vs. writing. It indicates present levels of performance as well as areas of educational need. (ages 11-18)

Test of Written Language (TOWL)	A norm-referenced measure of written expression which evaluates the following: semantics, syntax, productivity, spelling, handwriting, capitalization, and punctuation. It may be used to determine grade equivalent levels of performance as well as pinpoint areas of strength and weakness. (grades 2-9)
Test of Written Spelling (TWS)	A norm-referenced standardized measure of written spelling skills which consists of a dictation test, using both regular and irregular words. Three scores are available: spelling age, spelling quotient, and grade equivalent. (grades 1-7)
Vineland Social Maturity Scale	An informal approximation of general developmental levels derived through observation and interview measuring social communication, self-care skills, and general adaptive behavior. (ages 1-24)
Wechsler Intelligence Scale for Children-Revised and Wechsler Adult Intelligence Scale (WISC-R & WAIS)	Comprehensive measures of intellectual ability commonly used as predictors of academic success at school. Unlike the Binet, the Wechsler Scales break down the full scale IQ derived from its twelve subtests into verbal and performance ability. (ages 6-16; 16-adult)
Wide Range Achievement Test (WRAT)	A quick screening instrument designed to assess academic skills by grade level. Areas included are: word recognition, written math, written spelling and coding. (ages 5-adult)
Wide Range Interest-Opinion Test (WRIOT)	A culture-fair pictorial instrument developed to determine interests and attitudes of individuals regardless of age, sex, mental ability, cultural background or educational level. It does not require reading or language understanding.
Woodcock-Johnson Psycho-Educational Battery	An individual assessment system containing twelve tests of cognitive ability, ten tests of academic achievement, and five tests of interest level. The following scores can be obtained: age and grade scores, instructional range, percentile rank, relative performance index, and functioning level. Results may be used to determine relationship between learning aptitude, school performance, and student attitude. (ages 3-adult)
Woodcock Reading Mastery Tests	A set of five norm-referenced standardized subtests designed to measure the following reading skills: letter identification, word identification, word attack, word comprehension, and passage comprehension. No writing is required. (grades 1-12)

6.4 EVALUATION INFORMATION: AREAS OF INVESTIGATION

A. Intelligence

Functional Intelligence—What is the student's intellectual capacity to do a given task in his/her present environment?

Conceptualization—Can the student reason, generalize, draw conclusions, and make inferences? Is the student able to understand abstractions?

General Information—What social information does the student have the ability to use?

Problem Solving—Can the student identify appropriate solutions and processes for resolving common problems?

B. Academic

Arithmetic Achievement—At what grade/age level can the student perform the various operations required for math?

Knowledge of Word Meanings—What is the student's general understanding of words both in context and in isolation?

Listening Comprehension—At what grade/age level can the student perform the various operations required for math?

Oral Reading Comprehension—At what grade/age level can the student understand and answer questions about a story that s/he reads aloud?

Silent Reading Comprehension—At what grade/age level can the student understand and answer questions about a passage that s/he reads silently?

Word Recognition—At what grade/age level can the student recognize basic sight words from memory?

Study Skills—Is the student able to organize, use reference materials, outline, take notes?

C. Social Adjustment

Behavior, Social Adjustment—Does the student exhibit appropriate behavior and engage in appropriate activities? How does the student relate with peers, adults? How does the student feel about him/herself?

Classroom Behavior—Does student stay on task, complete assignments, work independently?

D. Perceptual Development

Eye Movement Control (Ocular Pursuit)—Can the student follow a reading passage or other visual stimulus without jerky eye movements or losing his/her place?

Fine Motor (Visual-Motor Integrating)—Can the student receive stimulus through the eyes and use the hands to perform manipulative and writing tasks?

Gross Motor Performance—Can the student perform age appropriate skills which relate to large muscle movements? Can the student use large muscles for turning, jumping, running, etc. at his/her age level?

Visual Perception of Words—Can the student identify, organize, and interpret words that are presented visually?

E. Language Development

Auditory Acquity—Can the student hear an oral stimulus at various decibel levels?

Auditory Discrimination—Can the student tell differences between closely related sounds or spoken words?

Auditory Sequential Memory—Can the student remember, in correct order, units that are heard? How many units? Does s/he need directions repeated?

Receptive Language—Does the student have difficulty understanding language that is spoken or written? Can s/he attach meaning to words?

Expressive Language—Can the student verbally communicate with others? Does s/he have trouble recalling words to use? Does s/he use correct grammar and sentence structure?

Section 7

The Case Conference Committee and Individualized Educational Program (IEP)

7.1 Function of the Case Conference

7.2 Summary of Case Conference Process

7.3 Individualized Education Plan Format

Section 7

THE CASE CONFERENCE COMMITTEE AND INDIVIDUALIZED EDUCATIONAL PROGRAM (IEP)

7.1 FUNCTION OF THE CASE CONFERENCE

When the student's educational evaluation has been completed, a Case Conference Committee meeting will take place.

A. A Case Conference Committee *must include:*

1. A qualified representative of the school (examples: Director of Special Education, Principal)
2. The student's teacher
3. The parents* (unless the parents choose not to participate only after all reasonable efforts have been made to involve the parent)
4. The student (unless it is demonstrated by the school and parent to be inappropriate)
5. A member of the evaluation team (when the student has been evaluated for the first time)

B. The Case Conference Committee *may also include:*

1. Specialists (examples: therapist, psychologist, representatives from other agencies, welfare case worker)
2. Other individuals invited by the parents or school (examples: Another parent of a handicapped student, representative of a voluntary organization)

C. The Case Conference *must be held:*

1. Within 40 school days after the initiation of the referral
2. At a time and place that is mutually convenient to the parents and the school staff

D. The Case Conference *must:*

1. Determine the student's eligibility for special education and/or related services. If the student is found eligible, the committee must:
   (a) plan and write the individualized education program (IEP);
   (b) RECOMMEND a placement in the least restrictive environment appropriate to meet the student's needs.
2. If the student is *not* found eligible, the committee may:
   (a) request additional evaluation procedures;
   (b) reconvene the conference for a later date.

E. The *student's eligibility* for special education and related services is determined by reviewing carefully all records, evaluation results and other shared information. It is the responsibility of the Case Conference Committee to DECIDE whether the student is handicapped, and thus:

* Should the parents fail to attend, the school may proceed with the conference.

1. in need of special education services;

2. in need of a modified educational program;

3. in need of related services;

4. in need of additional or special equipment.

F. The individualized education program (IEP) is a plan written by the Case Conference Committee and includes:

1. a description of the student's present level of performance;

2. a statement of long-term goals and short-term objectives that the committee has determined for the student;

3. a list of specific programs and related services with which the student will be provided by qualified teachers and school personnel;

4. the dates of initiation of services and evaluation of services;

5. a description of the manner in which the student's progress will be measured;

6. a description of the extent of participation in regular education programs.

G. If the legal guardians request it, a written copy of the Individualized Education Program must be given to them. In the case of separated or divorced parents, unless a written statement is filed which prevents either parent from receiving it, a copy shall be provided to the parent who requests it.

The school should take precautions against a parents' misinterpretation of the IEP as a legal contractual agreement, but rather should assist them in regarding it as an instructional/management tool with which to meet the student's educational needs.

H. The Case Conference Committee RECOMMENDS a placement which is within the least restrictive environment. The least restrictive is the placement which is appropriate to meet the needs of a handicapped student and approximates as closely as possible the educational placement of a nonhandicapped student of comparable age and/or functional ability.

I. The following lists possible school placements, beginning with the least restrictive environment, where most students will be placed, and continuing to the more restrictive environment, where relatively few students will be placed:

1. regular school programs

2. regular school programs with additional or special equipment

3. regular school programs with related services

4. regular school programs with special education and related services

5. part-time regular class instruction and part-time special class instruction

6. full-time special education classes in a regular school building

7. full-time special education classes in a separate facility

8. special education classes in a home or hospital program

9. special education classes in a residential facility.

J. Within 10 school days after the Case Conference Committee meeting, the coordinator of the Case Conference must send to the superintendent or his/her designee a report that includes the following:

1. the individualized education program;

2. a description of the tests, evaluation procedures and records used at the Case Conference;

3. dissenting opinions expressed, if any;

4. a description of any alternative educational opportunities that might also be available to the student.

K. If the student is not found eligible for special education, the Case conference report summary is completed by the chairperson and sent to the Superintendent or his designee.

7.2 SUMMARY OF CASE CONFERENCE MEETING

A. Introduction

1. Designation of Recorder

2. Participants

B. Description of meeting's purposes (by chairperson)

1. To discuss diagnostic data gathered by assessment personnel

2. To discuss educational alternatives as they relate to the case

3. To arrive at a consensus decision as to an appropriate individualized education plan

C. Presentations

1. Teacher and/or other person making referral:

a. basis of referral
b. academic
c. behavioral dynamics

2. Parent perceptions and other contributions to Case Conference Committee

3. Assessment personnel (or their written reports):

a. physician, optometrist, etc.
b. reading diagnostician
c. speech and hearing clinician
d. educational diagnostician
e. school psychologist

D. Discussion of data and development of an individualized education plan (IEP) for the student. (If special education placement is recommended, see next page for IEP format).

   If no special education is recommended, further discussion must include recommendations for additional testing, further conferencing or other plans.

E. Options and alternatives for placement and services

F. Dissenting opinions, if any

G. Closure statement

H. Adjournment

7.3 INDIVIDUALIZED EDUCATION PLAN (IEP) FORMAT

Formats for an IEP may vary; below is a sample outline which includes recommended components as well as required ingredients of P.L. 94-142:

A. Identification data

   1. date
   2. student name
   3. student birthdate
   4. parent address
   5. telephone numbers (home and emergency)

B. List of participants and relationships to student

C. Current grade level

D. A statement of the child's present levels of educational performance* which may include:

   1. academic
   2. perceptual
   3. behavioral (adaptive)
   4. social
   5. communication
   6. motor

E. A statement of annual goals, including short term instructional objectives*

* as required of P.L. 94-142, 121 a. 346

F. A statement of the specific special education and related services to be provided, which may include:

1. audiology
2. psychological services
3. physical or occupational therapy
4. recreation
5. assessment
6. counseling services
7. diagnostic or evaluative medial services
8. school health services
9. school social work services
10. parent counseling or training

G. Designated grade or program level

H. The extent to which the student will participate in regular educational programs*

I. The projected dates for initiation of services and the anticipated duration of the services*

J. Appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether the short term instructional objectives are being achieved*

K. Justification for placement

L. Documentation of dissenting opinions

M. Special considerations

1. medications
2. physical limitations
3. noteworthy habits, fears, behaviors
4. special instructions

Section 8

Programming Considerations

8.0 Introduction

8.1 Role of Building Principal or Others Responsible for Implementation

8.2 Least Restrictive Environment (LRE)

8.3 Mainstreaming

8.4 Program Decision-Making

8.5 Scheduling

8.6 Career and Vocational Education

8.7 Extracurricular Activities

8.8 Communication with Regular Education

8.8 Staff

8.9 Parent Involvement

8.10 Student Involvement

8.11 Grading

8.12 Graduation Requirements

Section 8

PROGRAMMING CONSIDERATIONS

INTRODUCTION

Secondary level handicapped students have the same array of programming needs as their non-handicapped peers. In developing an appropriate education program, consideration must be given to the following areas:

1) the role of the building principal or others responsible for implementation
2) least restrictive environment (LRE) requirements
3) mainstreaming
4) program decision-making
5) scheduling
6) career and vocational education
7) extra-curricular activities
8) communication with regular education staff
9) parent involvement
10) student involvement
11) grading
12) graduation requirements

8.1 ROLE OF THE PRINCIPAL OR OTHERS RESPONSIBLE FOR IMPLEMENTATION

The principal, as instructional leader, is responsible for insuring that appropriate educational programs are being developed and implemented for handicapped students in the least restrictive environment, based on individual student needs. It would be helpful to review the special education programs with the following questions in mind:

1. Is there a current IEP available for each handicapped student?
2. Is there an indication that parents and students have been involved in the development of the IEP?
3. Are the needs of the handicapped students kept in mind when the master schedule is developed?
4. Are staff members aware of programming alternatives for handicapped students?
5. Has a method of communication between regular and special education teachers been developed and implemented?
6. Are the special education teachers able to work cooperatively with guidance counselors and administrative staff in determining regular class placement for the special education students?

7. Are the regular education teachers aware that the special education teachers can provide resource assistance to them when needed?

8. Are the special education students encourged to participate in extracurricular activities?

9. Are the special education students placed appropriately in vocational education classes and programs?

10. Does a review of report cards indicate that special education students are successful in regular classes?

11. Has a method of problem-solving been developed and implemented for those times when a special education student may be having difficulty in regular classes?

12. Do both special education and regular education staff members understand that partnership efforts are required to insure successful educational programs for handicapped students?

13. Have grading practices and policies been clearly communicated?

14. Have graduation requirements been clearly communicated?

15. Have staff development opportunities been made available to regular education staff relative to the education of handicapped students?

8.2 LEAST RESTRICTIVE ENVIRONMENT (LRE)

Definition:

LRE refers to the educational placement of a handicapped student which appropriately meets his/her identified needs and approximates, as closely as possible, the educational placement of non-handicapped students of comparable age and/or functional ability.

Legal Mandate:

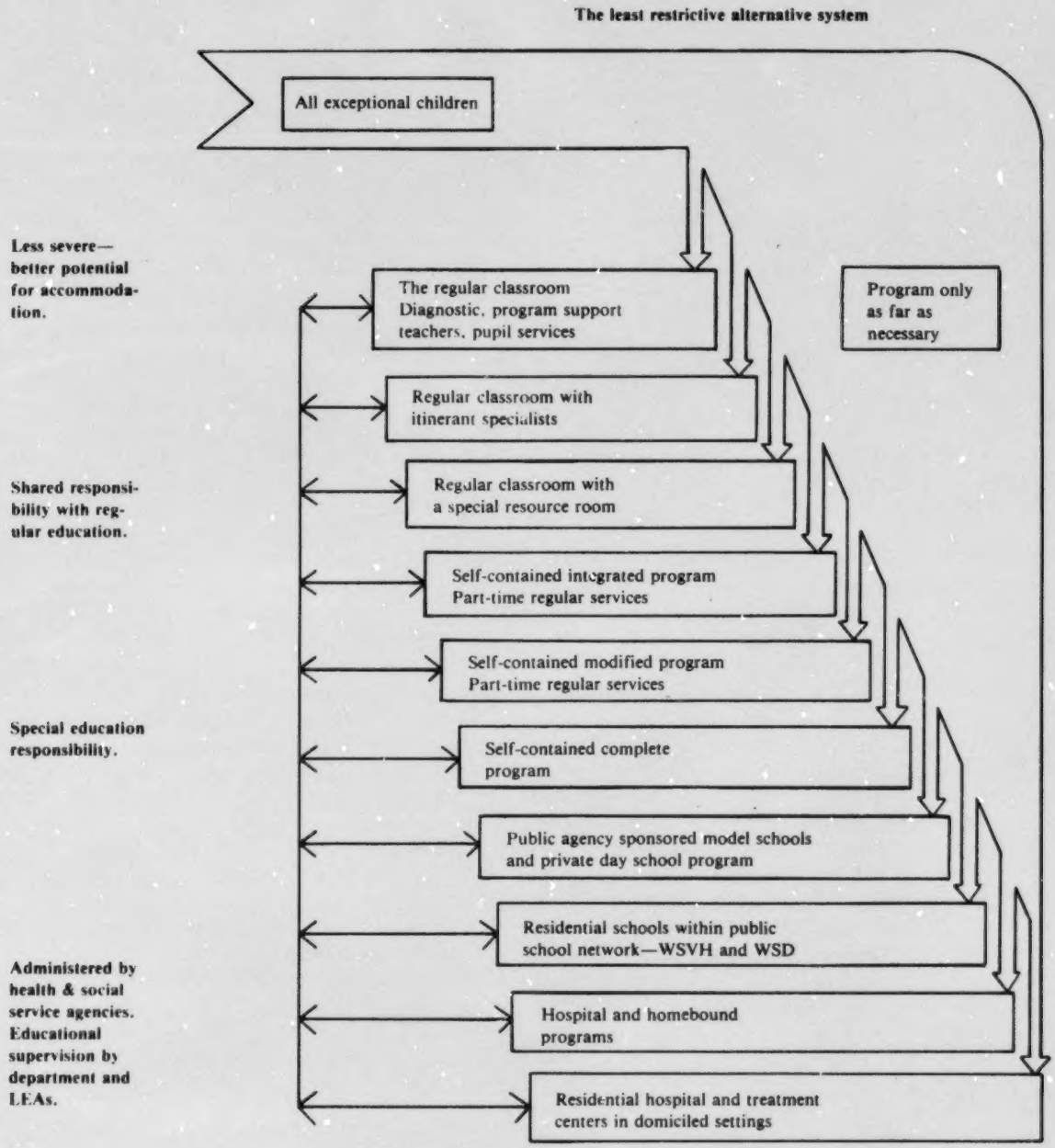
LRE, as mandated by P.L. 94-142, means that handicapped students should be educated, to the maximum extent appropriate, with students who are not handicapped. Programs which place handicapped students in special classes or separate schools are to be used only when the nature or severity of the handicap is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

The burden of justifying a placement outside of the regular classroom is on the party recommending it, whether it be the parents or school officials. This requirement is specified in P.L. 94-142, Section 504 of the Rehabilitation Act of 1973, and subsequent case law. The presumption is that "placement in a regular public school class is preferable to placement in any other type of program of education and training." (See: Pennsylvania Association for Retarded Children (PARC) v. Commonwealth of Pennsylvanis, 334 F. Supp 1257 (E.D. Pa., 1971)).

Implications:

The provision of equal education opportunities for special education students requires the establishment and delivery of high quality, comprehensive, educational programs and services. The concept of least restrictive environment has evolved not as a single option, but rather, as a range of instructional directives as well as an array of organizational arrangements and staff utilization patterns.

This range of alternatives is often depicted as a "cascade of services" as illustrated in the representation below:


The least restrictive alternative system
All exceptional children
Less severe—better potential for accommodation.
Shared responsibility with regular education.
Special education responsibility.
Administered by health & social service agencies. Educational supervision by department and LEAs.
The regular classroom Diagnostic, program support teachers, pupil services
Program only as far as necessary
Regular classroom with itinerant specialists
Regular classroom with a special resource room
Self-contained integrated program Part-time regular services
Self-contained modified program Part-time regular services
Self-contained complete program
Public agency sponsored model schools and private day school program
Residential schools within public school network—WSVH and WSD
Hospital and homebound programs
Residential hospital and treatment centers in domiciled settings

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8.3 MAINSTREAMING

While there is no mention of the word "mainstreaming" in P.L. 94-142, the word has been developed in an effort to describe the term "least restrictive environment." The spirit of least restrictive environment is commonly referred to as mainstreaming. *Mainstreaming refers to the temporal, instructional and social integration of special education students with normal peers, based on an ongoing, individually determined educational planning and programming process.* Mainstreaming requires clarification of responsibility among regular and special education administrative, instructional and supportive personnel. The definition of mainstreaming encompasses three major components: integration, educational planning and programming processes, and clarification of responsibility.

Integration

There are at least three elements of integration that could affect the educational experience of a student enrolled in special education:

1. TEMPORAL INTEGRATION—the amount of time in a regular class;

2. INSTRUCTIONAL INTEGRATION—the amount of sharing in the instructional environment of the regular class;

3. SOCIAL INTEGRATION—proximity, interaction, assimilation and acceptance by regular students.

8.4 PROGRAM DECISION-MAKING

The role of the special education teacher in the secondary school is twofold: (1) providing individualized instruction for students during their time in the special education class, and (2) monitoring student progress and assisting regular education and supportive staff in developing strategies that will insure student success in regular classes.

Decisions on mainstreaming students for academic and specialty periods must be made on an individual basis. It is advisable for the special education teacher and student to discuss the content of specific periods so that the student has some guidance and ownership in the decision-making process. Special education teachers must be fully cognizant of general education minimum performance requirements so that recommendations for mainstreaming may be more realistically tailored to the individual needs of the special education students. Consultation with guidance counselors, regular education teachers, department chairpersons and building administrators would be beneficial.

8.5 SCHEDULING

One of the greatest problems in implementing an appropriate educational program for handicapped students at the secondary level is scheduling. Flexibility must guide both the development of the master schedule and assignments to specific classes. Some principals have found that early program decisions and class assignments for the handicapped students facilitate the scheduling process.

8.6 CAREER AND VOCATIONAL EDUCATION

P.L. 94-142 mandates that career and vocational education programs be provided to handicapped students. Integration into regular education vocational classes is extremely beneficial. Modification of goals, objectives, and materials may be necessary. As with all classes, communication with the special education teacher is necessary to insure student success. In some instances, student needs may dictate that placement in a vocational program outside of the school setting is necessary. Decisions such as this are made by the Case Conference Committee. Without such a decision, the student must be allowed to participate in all vocationally oriented school programs such as work-study or on-the-job placements.

8.7 EXTRACURRICULAR ACTIVITIES

The regulations implementing P.L. 94-142 make specific mention of extracurricular activities. A variety of such activities are often available at the secondary level. A handicapped student may not be excluded from participation in these activities "*solely* on the basis of the handicap" (per Section 504 of the Rehabilitation Act of 1973). This does not imply that specific rules or regulations for activities must be specially altered or ignored for the inclusion of handicapped students, but simply that no prior judgment should be made which excludes a handicapped student from participation (e.g. "No handicapped students will be allowed in gymnastics".)

Often handicapped students do not become actively involved in school affairs. Encouragement and prodding from teachers and guidance counselors will assist students in taking advantage of these beneficial activities.

8.8 COMMUNICATION WITH REGULAR EDUCATION STAFF

When students are mainstreamed into regular classes, the special education teacher must use a variety of techniques to monitor the student's progress and insure success. This necessitates the development of a communication system between special and regular education teachers. The type of information which requires monitoring includes attendance, academic performance and social behavior.

If a student is encountering persistent difficulty in the regular class, the special education and regular class teachers should meet to determine methods to help the student achieve success. Here, the special education teacher may act as a resource to the regular teachers in developing methods of instruction which will help alleviate the problems. At other times, a team approach to problem-solving may be a valuable means for designing alternate techniques. The problem-solving team could consist of building administrator, guidance counselor, special and regular education teachers. Consistent and open communication between staff is essential for a handicapped student to succeed in the educational program.

8.9 PARENT INVOLVEMENT

Efforts must be made to keep the parents of a handicapped student involved in the school program. Telephone calls, notes and conference times should all be used to assist parents in remaining partners with the school regarding their adolescent's educational plan.

8.10 STUDENT INVOLVEMENT

Students at the secondary level should also be involved in these discussions whenever possible and appropriate. To increase ownership in and responsibility for his/her own education, students should participate in the development of the IEP and in programming decisions. The utilization of counseling methods and shared problem-solving are beneficial strategies.

8.11 GRADING

Confusion over grading practices and policies can be detrimental to the implementation of a successful educational program for handicapped students. Furthermore, neither P.L. 94-142 nor Rule S-1 specifies grading procedures for special education.

It is essential, then, that special and regular education teachers, students and parents all have a complete understanding of district practices and policies. Since there is variation across districts, it is suggested that questions relative to grading be referred to the appropriate special education administrator, _____. (WRITE IN NAME FOR YOUR DISTRICT).

The Case Conference Committee may make recommendations regarding grading policies and also may address a student's grading on an individual basis within the terminal objectives of the IEP.

8.12 GRADUATION REQUIREMENTS

Case Conference Committee members and special education teachers should be familiar with local district graduation requirements, considering these when developing the IEP and also when making programming decisions. The guiding force for special education decisions is the IEP. Further questions relative to graduation requirements should be referred to the appropriate special education administrator,

_____. (WRITE IN THE PERSON RESPONSIBLE IN YOUR DISTRICT).

THE FOLLOWING TWO ARTICLES ARE INCLUDED AS GOOD ILLUSTRATIONS OF PROGRAM DEVELOPMENT FOR SECONDARY LEVEL STUDENTS WHO HAVE HANDICAPPING CONDITIONS:

Preparing Secondary Students for the Mainstream

SPENCER J. SALEND
DONNA VIGLIANTI

■ With increasing frequency, handicapped students are moving from special education to regular education placements. These two educational settings often differ in instructional format, curriculum demands, teaching style, behavioral expectations, physical design, and student socialization patterns. If the transition is to be successful, the mainstreamed student should be prepared for the environmental expectations (behavioral and academic) of the regular classroom milieu (Redden & Blackhurst, 1978).

PRACTICAL ASPECTS OF MAINSTREAMING

While numerous strategies exist to prepare nonhandicapped students for the entry of handicapped peers into the mainstreamed setting (Glazzard, 1979; Greenbaum, Varas, & Markel, 1980; Litton, Banbury, & Harris, 1980; Westervelt & McKinney, 1980), few strategies have been developed to prepare the handicapped student for entry into a regular class. Salend (1981) noted that an orientation program for the mainstreamed student should include an orientation to the new school's rules, mores, and extracurricular activities, as well as an introduction to school personnel and the roles these individuals perform.

Goodman (1979) presented a 10-step model for integrating students into a new educational setting. Of particular relevance in the Goodman model are Steps 1 and 2, which should be implemented a minimum of one month prior to the initiation of the new placement. Step 1, *deciding on a placement,* involves matching the mainstreamed student with an appropriate class and teacher. Step 2, *approximating the new environment,* refers to training the mainstreamed student to perform under the conditions and expectations that will exist in the new placement. For example, if the future learning environment requires the student to take notes, then the sending teacher should teach note-taking skills and require note taking in the special education setting.

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ANALYZING THE ENVIRONMENT

In order to determine which environment can best meet and accommodate the needs of the mainstreamed student (Step 1 of Goodman's model), the placement team must analyze the critical environmental features of the proposed learning environment. Similarly, in order to approximate the future learning environment (Step 2 of Goodman's model), the sending teacher must be aware of the environmental variables that affect student performance in the regular education setting. However, few systematic guidelines exist for analyzing regular classroom environments in order to prepare the handicapped student for entry into the regular class.

This article presents educators with a useful format to analyze the critical environmental features of a regular classroom in order to facilitate preparation of the handicapped student for entry into the mainstreamed setting. The format is a written record of an educator's observation of a variety of variables relating to the mainstreamed setting.

While most of the information can be obtained by observing the future learning environment, some can be acquired by interviewing the receiving teacher. The observation record should be completed at least one month prior to a scheduled IEP meeting where such placement is considered or recommended.

There is no rigidly standardized format for the observation form. Its contents should be adapted to conform to the needs of an individual school or school district. Figure 1 provides a comprehensive model from which educators may tailor their own version. It has been successfully field tested in the Easton (Pennsylvania) Area School District. While the model was designed for secondary level students, it can also be adapted for elementary level students.

FIGURE 1
Classroom Variables Analysis Form

Teacher: _____ **Subject:** _____

Grade: _____ **Date:** _____

Teacher Completing the Observation: _____

A. INSTRUCTIONAL MATERIALS AND SUPPORT PERSONNEL

1. What textbooks are used in the class? What are the grade levels of the texts?

2. What supplementary materials are used in the class? What are the grade levels of the supplementary materials?

3. What types of media are frequently used in the classroom?

_____ television
_____ films
_____ filmstrips
_____ slides
_____ overhead projector
_____ record player
_____ audio tapes
_____ others (please list)
_____
_____
_____

4. What type(s) of support personnel are available in the classroom? How often are they available?

_____ aide
_____ volunteer
_____ peer tutor
_____ others (please list)
_____
_____
_____

B. PRESENTATION OF SUBJECT MATTER

1. How often does the teacher ... *% of time*

a. lecture? _____
b. use the blackboard? _____
c. use individualized instruction? _____
d. use small group instruction? _____
e. use large group instruction? _____
f. use individual centers? _____
g. others (please list) _____
_____ _____
_____ _____
_____ _____

2. What is the language and vocabulary level used by the teacher?

C. LEARNER RESPONSE VARIABLES

1. How often is the student required to ... *% of time*

a. take notes? _____
b. copy from the board? _____
c. read aloud in class? _____
d. do independent work? _____
e. participate in class? _____
f. others (please list) _____
_____ _____
_____ _____
_____ _____

2. In what ways can a student request assistance in the classroom?

3. How are directions given to students? How many directions are given at one time?

(Continued on next page)

Figure 1 (Continued)

D. STUDENT EVALUATION

1. How often and in what ways does the teacher evaluate student progress?

2. How are grades determined?

3. What types of tests are given?

_____essay
_____true/false
_____multiple choice
_____matching
_____completion
_____oral
_____simple recall
_____fill in
_____other

4. Does the teacher assign homework?
   a. What type?
   b. How much?
   c. How often?

5. Does the teacher assign special projects or extra-credit work? Please explain.

E. CLASSROOM MANAGEMENT

1. Does the teacher have a management system? Briefly describe it.

2. What are the stated rules in the classroom?

3. What are the unstated rules in the classroom?

4. What are the consequences of following the rules? What are the consequences of not following the rules?

5. In what ways and how often does the teacher reinforce the students?

6. Does the teacher follow any special routines? What are they?

F. SOCIAL INTERACTIONS

1. How often are student interactions ... *% of time*
   a. individualistic? _____
   b. cooperative? _____
   c. competitive? _____

2. What are the student norms in this class concerning ...
   a. dress?
   b. appearance?
   c. interests?
   d. acceptance of individual differences?
   e. other unique relevant characteristics? Please list.

3. What are the students' attitudes toward the handicapped?

4. What is the language and vocabulary level of the students?

5. What personality variables does the teacher exhibit that seem to affect the class?

G. PHYSICAL DESIGN

1. What, if any, architectural barriers are in the classroom?

2. How does the design affect the students'...
   a. academic performance?
   b. social interactions?

USING THE RESULTS

Results of the observation can help the placement team decide whether a student is ready to be placed in a regular classroom setting. If the decision is made to mainstream a student, observation results can aid the placement team in choosing an appropriate placement.

Information gathered in the observation can also foster the student's readiness for the mainstreamed setting by assisting the sending teacher in approximating the new learning environment. Even if the placement team decides that a student is not ready for the rigors of the mainstreamed setting, the observation data can provide the sending teacher with a series of objectives to teach in order to increase the student's readiness. These objectives can then be embodied in the student's individualized education program.

Once mainstreaming occurs, an ongoing evaluation of the student's progress in the regular classroom should commence. This necessitates periodic communication between the receiving and sending teachers. Toward this end, the observation form can serve as an agenda of issues to be considered in evaluating the student's progress. It can establish a practical framework for continued cooperation and communication between professionals. With communication established and the student prepared for entry into the regular education milieu, the potential for successful mainstreaming is increased.

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Special Subject Teachers and the Special Educator Work to Mainstream

RAMON M. ROCHA
DAVID WILEY
MARY JO WATSON

■ Teaching handicapped students, although a relatively recent experience for most regular class teachers, is not new to special subject teachers. In a variety of settings and for many years, teachers of art, music, and physical education have provided instruction to many handicapped learners. Much of this instruction, though well intentioned, may be of marginal value because of the special subject teachers' limited preservice training and inservice support.

With increased pressure for mainstreaming, a plethora of on-the-job training programs have appeared, each designed to help regular class teachers cope with handicapped students. In addition, teacher training institutions have begun to recognize that additional teacher skills are now required; as a result, special education courses are increasingly incorporated into existing elementary and secondary preservice teacher education programs.

Unfortunately, little or no provision has been made to aid the special subject teacher at either the preservice or inservice level. Much needs to be done to help these teachers meet the instructional needs of handicapped students who have been placed in less restrictive environments. Inservice training and consultation services are desperately needed. Probably the best and major source of this help will be the special education teacher.

STATEMENT OF THE PROBLEM

Public Law 94–142 encourages the appropriate integration of handicapped children not only into academic classes but also into nonacademic classes. In a report to Congress (1979) prepared by the then Department of Health, Education and Welfare, it was observed that "the first integrated experiences of handicapped children placed in separate academic environments are usually in the nonacademic areas of music, art, and gym" (p. 39).

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The report does not explain why these nonacademic areas were originally selected for mainstreaming. Two possible reasons are: (a) that art, music, and gym teachers were considered to be adequate to the task of mainstream instruction; (b) that mildly mentally retarded students (the initial group to be mainstreamed) could profit from nonacademic special subject instruction.

Research by Bird and Gansneder (1979) strongly indicated that physical education teachers did not consider themselves adequately prepared to mainstream handicapped students. Flynn, Gacka, and Sundean (1978) reported:

> Although the majority of teachers and administrators responding to a recent survey agreed that mainstreaming is a desirable educational and social reform (75% either agreed or were undecided), they felt inadequately prepared to serve the needs of mainstreamed exceptional children. Further, 80% to 90% favored the offerings of in-service and graduate courses to build competence for effective mainstreaming. (p. 562)

The survey was not restricted to special subject teachers, though it can be assumed that they were represented in the sampling. These survey findings point to the need for special education teachers to assume and/or further expand their roles as inservice trainers and consultants to special subject teachers.

Tashjian (1979) observed that special education teachers can no longer restrict their role to meeting the needs of handicapped students in self contained settings. Special educators must assume more of a support role for their colleagues who, while willing, often lack training to meet the needs of exceptional students.

Consultation and instructional modification are both necessary to successful mainstreaming in special subject areas. Accordingly, the special educator must engage in a series of sequential tasks in close cooperation with the special subject teacher.

Figure 1 illustrates the overlapping instructional responsibility of special education and special subject areas. The content/instruction specific to each area must be merged to meet the needs of mainstreamed students successfully.

THREE STAGES OF MAINSTREAMING

The tasks required of the special educator to mainstream handicapped students successfully into special subject programs can be organized into three stages which reflect a sequence of ordered tasks and a progessively greater degree of interaction between the special educator and the special subject teacher. Figure 2 graphically represents these interrelationships.

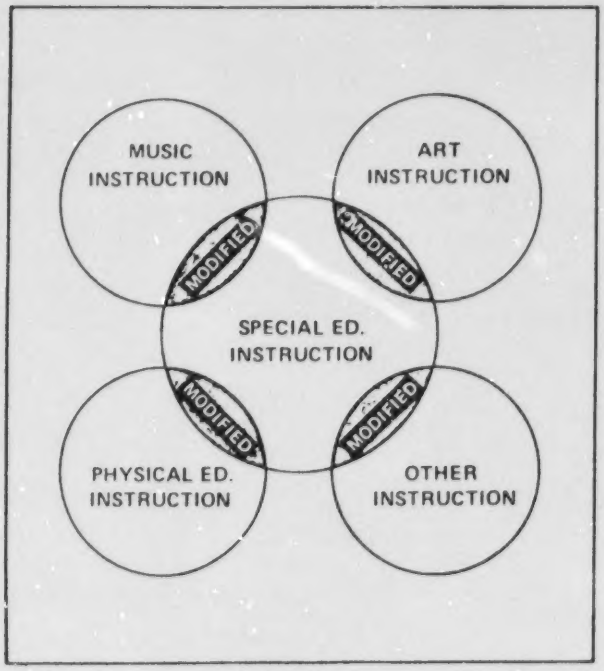
STAGE I

Tasks at the first stage must be accomplished before handicapped students are scheduled into special subject areas such as art, music, or physical education. These tasks are designed to determine the feasibility of mainstreaming individual students, making initial overtures to the special subject teacher, and beginning remedial training for students.

Acquisition of a Knowledge Base

At this stage, the most important task for the special education teacher is to acquire a working knowledge of the special subject area. This includes not only curriculum content and sequence but also materials and teaching strategies.

FIGURE 1
Modified Special Subject Instruction:
A Shared Responsibility



Such information may be gathered in two ways: first, reference sources such as the ERIC system and regional resource centers can be consulted; and, second, the special subject teacher can be used as an informal information source. Both of these approaches to gathering information have advantages, and a mixture of the two is advisable.

Student Identification

The next task at Stage I, that of identifying students who are ready for mainstreaming, builds upon the special educator's information base in the special subject area. A list of entry level or prerequisite skills for the particular subject is generated and used to chart student skill profiles which, in turn, pinpoint student strengths and weaknesses.

The identification of three groups of handicapped students is necessary: (a) those who exhibit the ability to profit from the existing or "regular" special subject content and instruction; (b) those who do not as yet exhibit the necessary entry level skills, but can learn them through remedial instruction; and (c) those students whose degree and type of learning deficits require program modifications if they are to receive appropriate instruction in the special subject.

For the first group, the only remaining tasks for the special educator are that of scheduling and continued monitoring of student progress. The second or "remedial" group will receive supplementary instruction provided by the special education teacher. For the third or "instructional modification" group, the decision will have to be made whether to forego instruction in the special subject area or to attempt to get the special subject teachers to modify their materials and/or methods to accommodate student deficits.

Writing the IEP

After the degree of mainstream integration for the handicapped student has been proposed, the task of writing the individualized education program (IEP) can begin. Here the expertise of the special educator with experience in writing such plans is critical. However, the input of the special subject teacher, who has the requisite knowledge of the special subject curriculum content, is also a crucial factor.

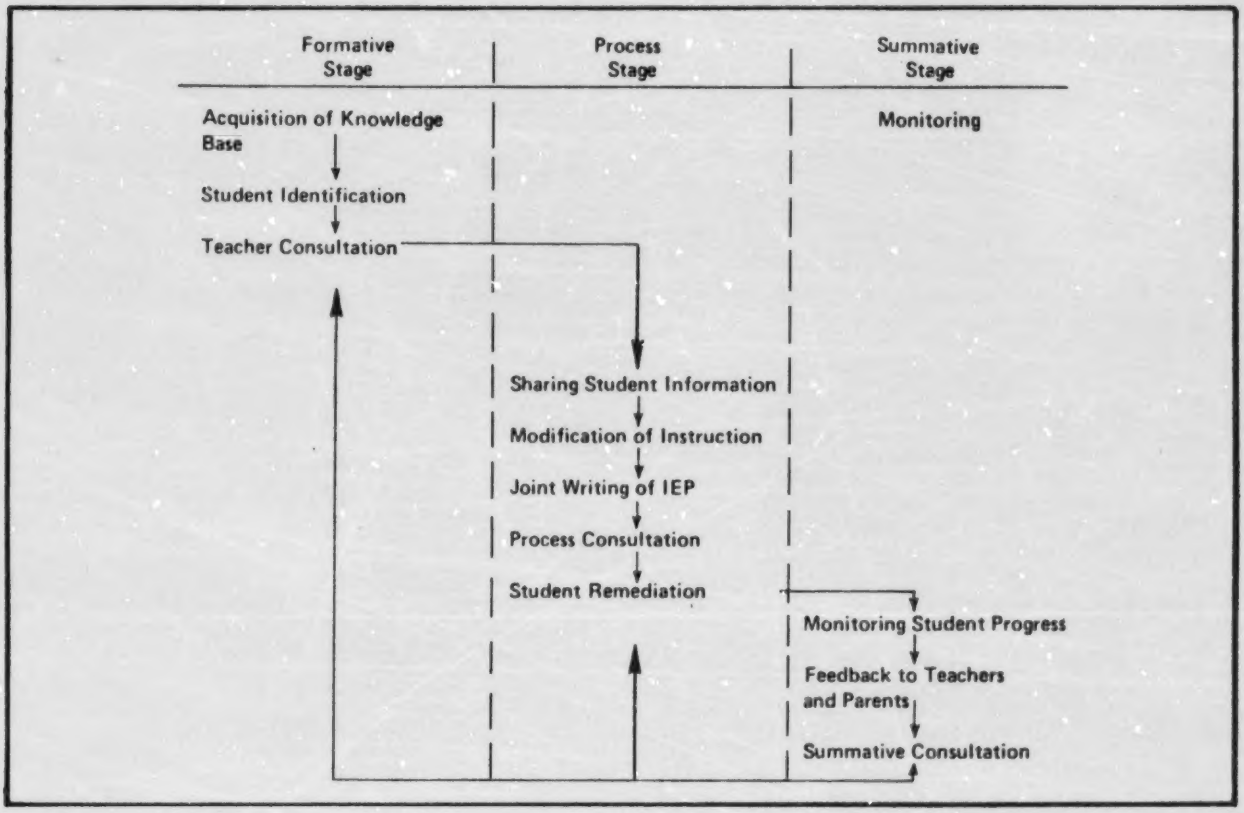
Agreed-upon modifications are translated into the components of an instructional plan. Appropriate goals, a sequence of objectives, instructional strategies, special materials, and evaluation strategies are cooperatively decided.

The special educator presents the plan, in the form of an initial draft, to the parents during an IEP meeting. Once the IEP is completed and approved, the handicapped student can be scheduled for the modified special subject instruction.

Teacher Consultation

Throughout the initial stage, the educational-consultant role of the special educator is ongoing. Building a close working relationship with the special subject teacher is a priority. Successful information sharing and mutual decision making initiated at this stage are essential if the difficult mainstreaming tasks at the later stages are to be accomplished.

FIGURE 2
Process of Preparing Special Subject Teachers for Mainstreaming



STAGE II

The tasks at this second stage require increasing levels of cooperation between the special educator and the special subject teacher. The success of the mainstreaming program will be determined during this stage of instructional planning and modification.

Information Sharing

The first task for the special educator is to share student information that has been gathered for each handicapped student. Student skill profiles are jointly evaluated and decisions are made concerning grouping and scheduling students for instruction. Eligible students are placed into the regular program and agreement is reached to modify instruction and/or offer remediation for those who lack the necessary entry skills.

Instructional Modification

The next task, modification of the existing program, is the most difficult and requires the greatest degree of cooperation. Here the special educator must not only convince the special subject teacher that modifications can be made, but must also provide the expertise needed to effect the desired changes. The special educator will need to draw upon all the knowledge and skills acquired during preservice and inservice training, as well as experiences in such areas as individualizing instruction, diagnostic/prescriptive teaching, learning style assessment, knowledge of special materials, and task analysis of skills. All of these instructional variables are typically manipulated by special educators, but may be unfamiliar to the special subject teacher.

Modifications may include a combination of changes in the special subject program, including content, teaching strategy, student grouping, and rate of presentation. Each of these may need to be manipulated to match the learning style and capabilities of the individual student.

Remediation/Modification of Activity

Remediation activities (provided by the special education teacher) and modification of special subject activities (provided by the regular teacher) will need to be determined based on the nature and severity of the handicap. Through joint teacher efforts, remediation activities and modifications can be implemented in any special subject area.

Consider the following example in the special subject area of physical education. The physical education teacher has prepared a lesson plan for a volleyball activity (Figure 3, Part A) which includes a statement of the objective, teaching activities, materials to be used, and evaluation procedure.

FIGURE 3
Modified Volleyball Lesson Plan
(Grades 7–9)

PART A: Volleyball Activity (Lesson) for Regular Physical Education Class

1. *Objective:* The student will be able to name the players' positions on a volleyball team and will be able to tell which player position is the server.
2. *Teaching Activity:* A diagram of a volleyball court will be placed on a chalkboard depicting the players' positions in the front court and back court.

LB	LF	RF	RB
CB	CF	CF	CB
RB	RF	LF	LB

Center line
net

The students will be instructed that the front line (front court players) on the right, in the center, and on the left are the right forward, center forward, and left forward respectively. The back line (back court players) on the right, in the center, and on the left are referred to as the right back, center back, and left back respectively. The right back is the server, when service is on your team's side.

3. *Materials:* Chalkboard, chalk
4. *Evaluation:*
   a. Given a paper and pencil test which includes a diagram of a volleyball court, the student will write the initials of the players' positions in the correct area on the diagram, and will correctly circle the serving position with 100% accuracy.
   b. Given a paper and pencil test, the student will list the names of the players' positions with 100% accuracy.

PART B: Remediation Activities by Special Education Teacher

1. *Objective:* Remains the same as the regular class objective.
2. *Suggested Teaching Activities:* To facilitate student attainment of the objective, the regular class activity is broken down into smaller tasks.
   a. The teacher will draw a diagram of a volleyball court to serve as a *model* for the student.
      (1) Draw a rectangle to represent the volleyball court; draw a line dividing the court (rectangle) in half to represent the net line/center line.
      (2) The teacher and student will determine how many teams play a game of volleyball (two teams).
      (3) Place 6 *x*'s on half of the court to represent players on one team.
      (4) Circle the *x* in the right back position to represent the server.
   b. The student is given a diagram of the court on the chalkboard or on a ditto.
      (1) Using the *model* as a guide the student places 6 *x*'s on the diagram to represent positions of players.
      (2) Using the model as a guide, the student circles the *x* that represents the server on the diagram.
      (3) As soon as the student knows that there are 6 players on a team, *fading* of the teacher's model can be initiated by eliminating *x*'s (one at a time) until student can place *x*'s on the diagram without the using a model.
         (a) Names of players can be *paired* during this step with the *x*'s. As each player's name is learned, the *x*'s are faded.
         (b) Numbers 1–6 may be assigned to each player in lieu of the *x*'s and paired with each player position name.

4	5	6
3	2	1

1–RB	3–LB	5–CF
2–CB	4–LF	6–RF

Student refers to numbers on side of paper which correspond with player's name.

   c. *Suggested Teaching Activities Can Be Modified By:*
      1. Color-coding names.
      2. Color-coded *x*'s and pairing with color-coded names and/or
      3. Color-coded numbers assigned to players and names of players' positions.
   d. Slate board with magnetic alphabet letters can be used to represent players' positions. The student *manipulates* the alphabet letters into the proper positions on the slate board. A pegboard and alphabet letters can be manipulated in the same manner.
3. *Materials:* chalkboard, chalk; dittos of court diagram; magnetic letters and slate board; pegboard/alphabet letters
4. *Evaluation:* Remains the same as regular class evaluation for volleyball activity.

PART C: Modification of Activity Within Regular Physical Education Class

1. *Objective:* Remains the same as the regular class objective.
2. *Teaching Activities:* Players' positions (initials) are painted on the court outside and color-coded to correspond with the colors used during special education instruction. The serving position is circled on the outside court. Players' positions (initials) are marked on the indoor court using colored tape to correspond with color code used in special education instruction. Initials can be faded out by replacing them with taped lines of the same color.

LF	CF	RF
LB	CB	RB

–	–	–
–	—	–

3. *Materials:* Varying colors of paint for outside court. Varying colors of tape for indoor court.
4. *Evaluation:*
   a. Given a diagram of a volleyball court, the student will draw an *x* on the diagram to indicate the service position with 100% accuracy.
   b. Given a diagram of a volleyball court, with six *x*'s to represent playing positions, the student will point to each position with 84% accuracy when asked by the teacher.
   c. Given a diagram of a volleyball court, the teacher will point to a position and the student will correctly state the name of that position.

The physical education teacher and special educator will jointly study and revise this plan to accommodate the needs of mainstreamed students. Remedial activities and instructional modifications are generated. These tasks are outlined in Figure 3, Parts B and C. Modifications can range from minor variations in student response mode requirements to extensive changes in all components of the program.

Process Consultation

The ability of the special education teacher to develop a close rapport with the special subject teacher cannot be overemphasized, particularly because the special subject teacher may be asked to make major and unfamiliar program changes. The relationship must reflect mutual trust in each other's professional competence. Each party must believe that the considerable efforts and modifications decided upon are necessary and that they will work.

Student Remediation

Finally, during the second stage, the special education teacher faces the ongoing task of student skill remediation. This task includes entry-level skill training for students not yet mainstreamed, as well as the remediation of any problems exhibited by students already receiving traditional instruction in these programs.

STAGE III

All of the tasks in the first and second stages of programming culminate in the implementation of modifications and special strategies by the special subject teachers. However, this does not end the responsibility of the special educator, who assumes the essential tasks of monitoring, feedback, consultation, and remediation.

Monitoring Student Progress

Once handicapped students are placed in special subject instruction, they must be closely and constantly monitored to insure that instruction is effective. The use of criterion referenced measures of student behaviors, both of skill performance and social instructions, is required. Data is gathered through direct observation and documentation of student responses and the products of student task performance.

The special educator should schedule student observations in advance, and should record observations in the form of behavioral checklists of frequencies of exhibited behaviors. These can be compared to predetermined criteria for student maintenance in the program.

Feedback to Teachers and Parents

The data gathered by the special educator provides the basis for communicating the effectiveness of the program to others. Feedback provided to the special subject teacher indicates whether the instructional modifications are working. If they are not, a reevaluation of earlier stages and tasks must be conducted, and further modifications made.

The special educator also acts as a liaison between the special subject teacher and the parents of mainstreamed students. Parents receive formal and informal reports of data gathered by both the special educator and the special subject teacher.

Stage III Consultation

The special educator's consultation task continues with an even greater degree of intensity. Observing on-the-job performance of teaching colleagues can threaten even the closest relationship. When observations indicate a need for revision of earlier tasks, diplomacy and tact are essential. Decisions must be cooperatively made and implemented in an atmosphere of mutual support, with neither party dominating or manipulating the other.

SUMMARY

Public Law 94–142 insures the right to education for all handicapped children. An important aspect of this right is the concept of the least restrictive environment in which learning can take place. The three stage model presented offers a workable strategy by which mainstreaming for special subject instruction can be effectively implemented.

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Progress toward a free appropriate public education: A report to Congress on the implementation of Public Law 94–142: The Education for All Handicapped Children Act. Washington DC: U.S. Department of Health, Education and Welfare, Office of Education, January 1979, pp. 31–48.

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Section 9

Case Review

9.1 Definition

9.2 Annual Case Review Process

9.3 Annual Case Review Flowchart

9.4 Chairperson's, Principal's Checklist for Annual Case Review

Section 9

CASE REVIEW

9.1 DEFINITION*

A. After written parental consent, the student is placed in the program which has been jointly agreed upon by school personnel, parents and the student in order to provide the student with a free appropriate public education.

B. The school must provide (or assure the provision of) the program and related services in the individualized education program in order to help the student reach the long-term goals and short-term objectives.

C. The student must have an *annual case review.* An annual case review is a meeting of a case conference committee. The purpose of the review is to determine the student's individualized education program (IEP). The committee prepares a written report, which recommends one of the following:

1. Continued placement in the student's present special education program;

2. Transfer to a different level (example: primary, intermediate, junior high) or different kind of special education program (example: resource room, full-time special class);

3. Transfer to a regular school program;

4. Transfer to another program at the public school's expense (example: state or private residential program).

D. If, at the annual case review, the case conference committee recommends any alternative other than continuing the student's present program, the parents must:

1. Receive written notice of the change;

2. Receive written notice of parental rights;

3. Give their written consent before any significant change can take place. (However, change of teacher does not require written parental consent.)

9.2 ANNUAL CASE REVIEW PROCESS**

A. Process

The annual case conference is the process whereby each handicapped student enrolled in special education and related service programs is assured of continued monitoring of his/her individual educational program. This process is reflected in the chart (9.3).

B. Individual Progress Report Updated

The regular and special education teachers will update the handicapped students individual progress and integrate this information into the individualized education program.

C. Annual Case Conference Committee Identified

* A parent citizen's handbook, *op. cit.*

***Policy and Procedure Manual: Bartholomew Special Services Cooperative.* Columbus, IN: Bartholomew Consolidated School Corporation

The case conference committee must meet on an annual basis to consider potential program modification(s). Of the initial case conference committee participants, the minimal annual review committee for most students would include:

1. Administrator or special education and/or related service teacher

2. Student's teacher (regular or special education)

3. Parent(s)

4. Student

D. Parents Notified

The parents shall be given adequate notice, in his/her native language, of the date, time and place of the meeting. The school must have a record of its attempts to arrange the meeting at a mutually agreed upon date, time and place, such as:

1. Detailed records of telephone calls made or attempted and results of the calls

2. Copies of any correspondence sent to the parent and any responses received

3. Detailed records of visits made to the parent's home or place of employment and the results of the visits

4. The notice will include general information about the annual case review including:

   (a) the purpose of the meeting
   (b) a listing of the expected participants
   (c) a description of the collected data to be discussed
   (d) notice that the parent may request the participation of and/or be accompanied by any other individual(s) of the parent's choosing

5. The school shall take whatever action is necessary to insure that the parent understands the proceedings at the meeting, including arranging for an interpreter for a parent who is deaf or whose native language is other than English. (Please contact the Director of Special Education if an interpreter is needed.)

6. The committee shall determine what, if any, additional data are required in order to assess the student's current and continuing needs.

E. Individualized Education Program Developed

The committee shall prepare a written individualized education program recommending one of the following:

1. Retention in the same program

2. Transfer to a different level (elementary, junior high, senior high, etc.), intensity (instructional resource service, full-time special class), or type of special education program (from language therapy to articulation therapy, from a more or less restrictive environment)

3. Transfer to a regular school program

4. Transfer to an appropriate program not with the public school.

F. Proposed Change in Student Placement

Recommendations E.2, E.3, and E.4 (above) constitute a proposed change in the student's educational placement. Accompanying the notice to the parent of the change, with respect to recommendations E.2, E.3, or E.4, parents are to receive:

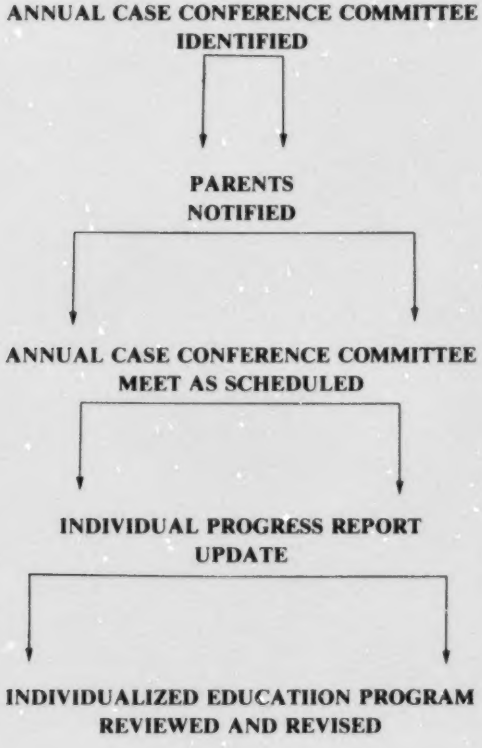
1. Annual case review summary
2. Notice of parent rights
3. Parent permission for placement

G. Procedures for Nonattending Parent

If a parent fails to attend the mutually agreed upon annual case conference meeting and if the parent failed to request an alternate date, time or place, the committee can proceed with the meeting. If the committee's recommendation involves a continuation of the same program, additional parental permission is not required.

However, if the committee recommends either a change of placement to a more or less restrictive environment, a transfer to a different level, or change in intensity of special education services, the original case conference committee placement process will need to be implemented.

9.3 ANNUAL CASE REVIEW FLOWCHART


ANNUAL CASE CONFERENCE COMMITTEE IDENTIFIED
PARENTS NOTIFIED
ANNUAL CASE CONFERENCE COMMITTEE MEET AS SCHEDULED
INDIVIDUAL PROGRESS REPORT UPDATE
INDIVIDUALIZED EDUCATIION PROGRAM REVIEWED AND REVISED

9.4 CHAIRPERSON'S, PRINCIPAL'S, CHECKLIST FOR ANNUAL CASE REVIEW

Pre-conference Responsibilities:

A. Have the date and time for the annual review been mutually established with parents?

B. Has the appropriate form, "Notice of Annual Case Review", been sent to the parent confirming the date and time?

C. Have the following persons been contacted?

1. teacher
2. special education teacher
3. evaluator(s)
4. other

D. Has someone been appointed to record the minutes of the annual case review meeting?

Post-conference Responsibilities:

A. Did the parents sign the necessary forms?

B. Have the IEP and any changes been explained to the parents?

C. Have all the forms been:

1. forwarded to the appropriate offices?
2. given to parents?
3. placed in files?

Section 10

Due Process

10.1 Due Process Overview

10.2 Suspension, Expulsion, Exclusion

10.3 Flow Chart for Expulsion and Change of Placement Procedures

10.4 Checklist

Section 10

DUE PROCESS

10.1 DUE PROCESS OVERVIEW

Protection of the rights of a handicapped student is intended throughout both the federal law (P.L. 94-142) and Indiana Rule S-1. The following areas are illustrative of the safeguards provided:

right of the parent to be informed of each step in the referral and evaluation process and to be informed of all available procedural safeguards;

written parental consent to evaluate a student, to place a student in special education and to significantly change the student's placement;

written notice and interviews in the parent's native language or other mode of communication;

provision of nonbiased testing and procedures which assess both strengths and current performance level, account for cultural and language background, and include more than a single test in arriving at program and placement decisions;

educational evaluation process made by a team of people, including the student's parents and the student, when appropriate and/or desirable;

specific timelines for completion of each step in the educational evaluation and placement process;

right to placement in the least restrictive environment appropriate to the needs of the handicapped student;

provision of related services which may be required in order for a handicapped child to benefit from special education;

parent's right to request a reevaluation, a hearing in the case of disagreement, *and further appeal* to the Commission on General Education.

10.2 SUSPENSION, EXPULSION, EXCLUSION

A handicapped student, as any other student, may be denied the right to attend school or to take part in any school function as outlined in the statute regarding due process in student discipline, I.C. 20-8.1-5. The due process procedures shall also be observed in denying transportation and other related services (if these are included in the student's Individualized Education Program). Transportation considered to be the same as that offered to students in the area, which neither transports the special education student to a specialized facility or makes use of specialized equipment (life, van, etc.), is not a related service. Therefore, no special procedures are required to terminate transportation service for a student in special education unless regarded as a related service.

The Individualized Education Program (IEP) may be useful in delineating the discipline strategies to be implemented within the student's program while simultaneously providing the school with adequate protection. Thus, the use of suspension or other tactics may be identified prior to the occurence of misconduct.

Suspension

Within Indiana, a principal has the responsibility and the authority to suspend up to 5 days any student who causes disruption or interference with the educational process. This suspension procedure may be used with handicapped students. However, should suspension be needed on more than an occasional basis, it may be advantageous for the principal to consider convening a case conference. Even if suspension is used rarely or only once, it is best that the principal keep in mind the nature of the misbehavior and the nature of the student's handicapping condition, which may suggest the need for a case conference. Nevertheless, if a principal is doubtful about the need for a conference or about the decision to suspend the student, s/he perhaps should convene a case conference.

Case Conference

As with other Case Conference Committee meetings, a parent shall be given adequate notice in his/her native language of the date, time and place of the meeting. Records of the attempts—telephone documentation, copies of correspondence and documentation of visits made to parents—must be kept by the school. The notice should include:

a. purpose of the meeting;

b. listing of expected participants and notice that the parent may request the participation of and/or be accompanied by any other individual(s) of the parent's choice;

c. listing of the information to be discussed.

If needed, the school should provide an interpreter for a parent who is deaf or whose native language is not English. The Director of Special Education (or designee) shall chair the meeting. (It is important for the principal to consider declining the chair, since his/her role would liken to that of a prosecutor.)

The Case Conference Committee shall determine whether or not there is a causal relationship between the misconduct and the student's handicap.

Complaints

Complaints regarding decisions which may violate the requirements of Rule S-1 may be filed by parents or guardians, teachers, advocates or other interested persons to the Division of Special Education of the State Department of Public Instruction. Within 40 school days, the Division will respond in writing after an investigation of the matter. If not satisfied, the party may appeal to the Commission on General Education.

Role of the Principal:

1. respond to questions and investigation procedures by Department of Public Instruction;

2. collect data from classroom teachers and/or other relevant staff regarding the nature of the complaint.

Hearings

A hearing may be requested by the school or parent regarding the initiation, change or denial of identification, evaluation, placement or provision of free appropriate public education for a student. (A school may, for example, request a hearing if a parent refuses permission for a needed evaluation.)

Written request by either party must be made to the local schoo! board with a copy to the State Superintendent of Public Instruction. Within 20 school days, the hearing will be held, during which either party may be represented by a lawyer or another person, may present information, witnesses and evidence, and may be accompanied by advocates, professionals or other persons. A decision is made by the hearing officer within 15 school days.

Role of the Principal:

1. assist in providing facts pertaining to the appropriateness of any placement, denial of placement or transfer;

2. inform parents of free or low-cost legal services.

Appeals

If the result of the hearing is not acceptable to either the parents or to the school, the next step is a written appeal by that party within 20 school days to the Commission on General Education. Within 20 days, an impartial review of the hearing will be conducted by the Commission, whose decision is considered a final order unless further appealed to civil court.

Role of the Principal:

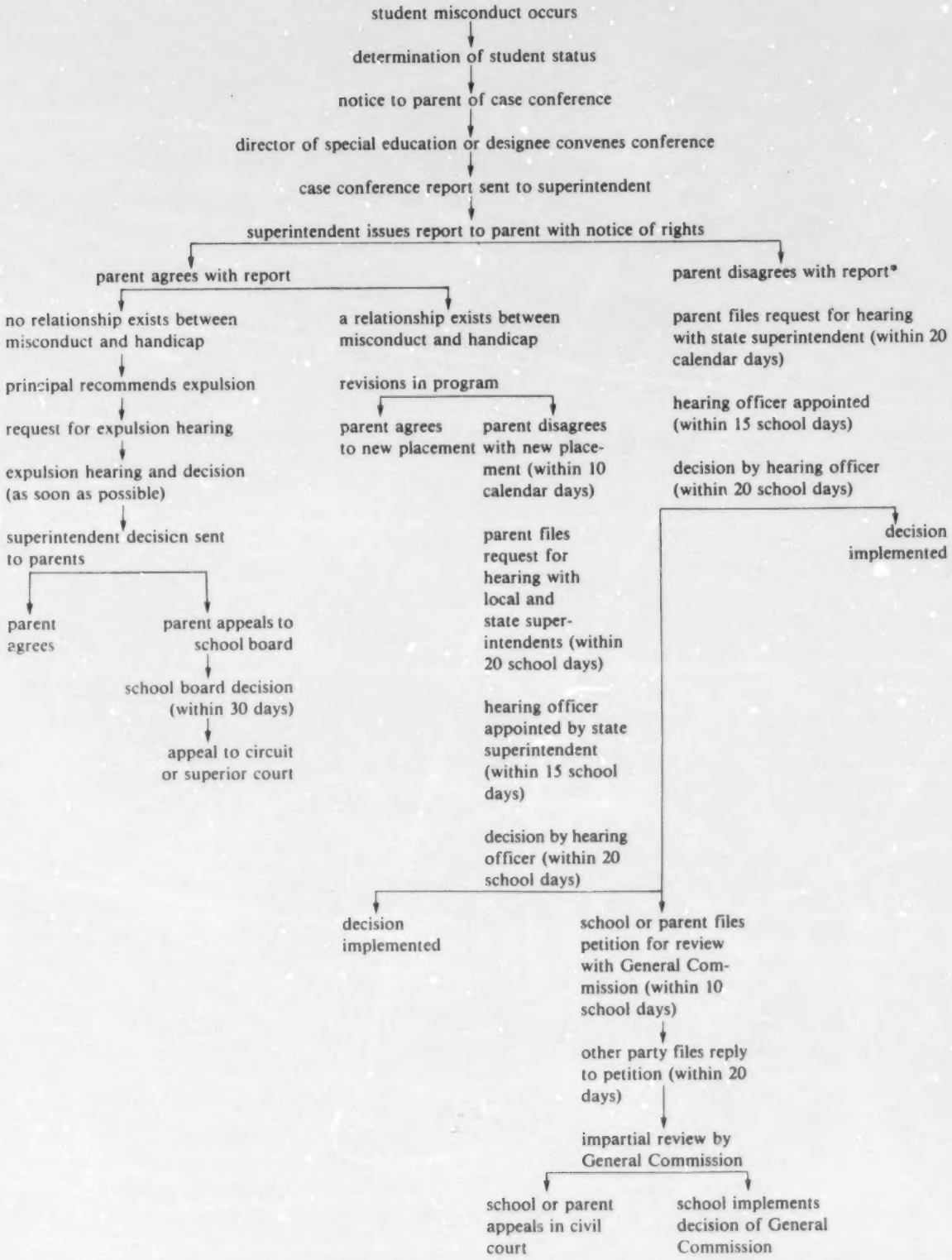
provide the facts pertaining to the issue under appeal. (The Commission may rule without hearing the argument orally.)

NB During any proceeding regarding a complaint, hearing or appeal, the student involved shall *remain* in his or her present educational placement until the rendering of a decision.

10.3 FLOW CHART FOR EXPULSION AND CHANGE OF PLACEMENT PROCEDURES

The following flow chart illustrates procedural steps in the expulsion of a student (when no relationship exists between misconduct and a handicap) on LEFT side of page; steps in the change of placement (when a relationship exists between misconduct and handicap) in CENTER of page.

The chart also depicts the procedures to be followed when a parent disagrees with the superintendent's report, on RIGHT side of page. Further appeal procedures are also outlined in the chart.


student misconduct occurs
determination of student status
notice to parent of case conference
director of special education or designee convenes conference
case conference report sent to superintendent
superintendent issues report to parent with notice of rights
parent agrees with report
parent disagrees with report*
no relationship exists between misconduct and handicap
a relationship exists between misconduct and handicap
principal recommends expulsion
request for expulsion hearing
expulsion hearing and decision (as soon as possible)
superintendent decision sent to parents
parent agrees
parent appeals to school board
school board decision (within 30 days)
appeal to circuit or superior court
revisions in program
parent agrees to new placement
parent disagrees with new placement (within 10 calendar days)
parent files request for hearing with local and state superintendents (within 20 school days)
hearing officer appointed by state superintendent (within 15 school days)
decision by hearing officer (within 20 school days)
decision implemented
school or parent files petition for review with General Commission (within 10 school days)
other party files reply to petition (within 20 days)
impartial review by General Commission
school or parent appeals in civil court
school implements decision of General Commission
parent files request for hearing with state superintendent (within 20 calendar days)
hearing officer appointed (within 15 school days)
decision by hearing officer (within 20 school days)
decision implemented

*current program is maintained for student

Expulsion

The expulsion of a handicapped student in special education is actually a misnomer; rather it is considered *a change in the student's placement* which must be preceded by a meeting of the Case Conference Committee as soon as possible after the misconduct.

If the Committee determines that a relationship exists between the misconduct and the handicapping condition of the student, the student may *not* be expelled. All options must be considered, such as:

1. examination of the student's current IEP to recommend changes in order to prevent further misconduct;

2. recommendation of a change of placement.

If no relationship is found, the Committee shall make a written report to the Superintendent, who will send a final report to the parent. This report will be accompanied by a notice, informing the parent of right to object before an independent hearing officer, how to request a hearing, the right to obtain an independent educational evaluation and all other rights. *Since no relationship was found, a regular expulsion may occur;* thereafter, parents appeal to the local school board and to circuit or superior court, for further appeal, as in any other expulsion proceeding. (N.B. If the student is recommended for expulsion, then this procedure is considered the same as that for the non-handicapped; expulsion of a handicapped student, then, is *only possible* when misconduct is *not* related to the student's handicapping condition. At that point, no special procedures are used and the student is dealt with as a non-handicapped individual, whose misconduct warranted expulsion).

Emergency Placement

Pending the outcome of the Case Conference Committee meeting, a student should not be removed from school unless s/he presents a danger to self or others. If a danger does exist, the student may:

1. remain in the current placement, with or without additional supportive service;

2. be temporarily placed in a more restrictive environment;

3. be given homebound instruction (which does not constitute suspension since no termination of educational program occurs).

When the case conference committee meets, it shall approve or disapprove of the emergency placement. If disapproved, the student will be returned to the original placement. If approved, the placement shall not exceed 45 days, at which time the Case Conference Committee must reconvene to consider extending the placement.

Exclusion

Exclusion is possible only for communicable disease, detrimental presence or illegal enrollment. This procedure may also be used for handicapped students.

Recommendations/Considerations for Building Administrators:

1. Be sure to know which students have been identified as "handicapped" and enrolled in a special education program or receiving special education services.

2. Suspension is a viable discipline tactic for handicapped students; documented records and prudent use of suspension are critical elements.

3. Exclusion of a handicapped student (for communicable disease, detrimental presence or illegal enrollment) must be acted upon with a firm rationale and a consideration of the nature of the handicap.

4. Remember that if the misbehavior is related to a student's handicap, he or she *must not be expelled;* but rather may be placed in an alternate program, as recommended by the Case Conference Committee. The committee may decide that the current placement is appropriate with modification or changes.

5. A handicapped student may be expelled *only if the misconduct is not related* to a student's handicap; if so, this can be done only following a case conference. Thereafter, normal due process regulations must be used.

6. Parents may appeal the decision of the case conference committee to the Division of Special Education, requesting a hearing before an independent officer.

7. The case conference committee determines a relationship between the misconduct and the handicap and *does not* take action or make recommendation regarding expulsion. Should the student be expelled in the normal procedure (following the determination that there is no relationship between the misconduct and the handicap), the parents may appeal the expulsion to the local board.

(Excerpted from Ketterman, S.D. & Ketterman, C.D. Disciplining handicapped students. *The Hoosier Schoolmaster,* 1981, 23(2), 6-8.)

For additional information, consult:

Rule S-1, available from your district's special education director or the Division of Special Education, Department of Public Instruction OR

Legal advisor for the Division of Special Education, Department of Public Instruction (317-927-0216).

10.4 CHECKLIST

1. Is there sufficient evidence to content that the misconduct was committed by the student?

2. Did the student have the opportunity for an informal hearing before suspension in order to consider his or her opinions and to allow the student to defend his or her position?

3. Did a Case Conference Committee establish a relationship between the behavior and the handicap?

4. Were the parents and student informed of all options, procedures and rights, including the right to a hearing and appeal?

Section 11
Glossary

11.1 Adaptive Behavior

11.2 Annual Case Review (ACR)

11.3 Audiology

11.4 Case Conference Committee (CCC)

11.5 Case Conference Report

11.6 Caseload

11.7 Class Size

11.8 Combination Classes

11.9 Educational Evaluation

11.10 Free Appropriate Public Education

11.11 Handicapped Student

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11.36 Speech Pathology

11.37 State Education Agency (SEA)

11.38 Surrogate Parent

11.39 Transportation

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Section 11

GLOSSARY

11.1 ADAPTIVE BEHAVIOR

The effectiveness or degree with which an individual meets the standards of personal independence and social responsibility expected of his/her age and cultural groups as reflected in the following areas:

1. Perceptual-motor skills development
2. Communication skills (including speech and language)
3. Self-help skills
4. Socialization (development of ability to interact with others)
5. Application of basic academic skills in daily life activities
6. Application of appropriate reasoning and judgment in mastery of the environment
7. Social skills (participation in group activities and interpersonal relationships)
8. Vocational and social responsibilities and performances

11.2 ANNUAL CASE REVIEW (ACR)

An annual case review conference will be conducted by a case conference committee on each student who is receiving special education in order to review and, if necessary, revise the student's individualized education program. A case conference to review or revise the student's individualized education program may be conducted upon the request of the parent and/or school at any time during the school year.

11.3 AUDIOLOGY

Those services provided by an educational audiologist or a clinical audiologist including:

1. Identification of children with hearing loss
2. Determination of the range, nature and degree of hearing loss, including referral for medical or other professional attention for the habilitation of hearing
3. Provision of habilitative activities, such as language habilitation, auditory training, hearing evaluation, speech reading (lip reading), and speech conservation
4. Creation and administration of programs for prevention of hearing loss
5. Consultation and guidance of individual student, teachers, and parent regarding hearing loss
6. Determination of the student's need for group and individual amplification, selecting and fitting an appropriate aid, and evaluating the effectiveness of amplification equipment

11.4 CASE CONFERENCE COMMITTEE (CCC)

The case conference committee shall be composed of the following:

1. A representative of the school, other than the student's teacher, who is qualified to provide, or supervise the provision of, special education
2. The student's special education teacher
3. The parent of the student, unless the parent chooses not to participate (only after reasonable efforts have been made to involve the parent)
4. The student, if the student chooses, unless it is demonstrated by the school and parent that the presence of the student is inappropriate
5. Appropriate specialists if determined by other state schools and/or agencies, who have or will have knowledge of or jurisdiction over the student
6. Other individuals at the discretion of the parent or school
7. A member of the evaluation team (required only when the student has been evaluated for the first time)

For a student already receiving services only for the communication handicapped, the teacher referred to above may be the speech-language pathologist.

11.5 CASE CONFERENCE REPORT

The written case conference report shall include, but not be limited to, the following: individualized education program; a description of each evaluation procedure, test, record, or report used as a basis for the program; dissenting opinions, if any; and a placement recommendation.

11.6 CASELOAD

Caseload is the total number of students who have been appropriately assigned to a given itinerant teacher, resource teacher, or speech-language pathologist. This total number includes students who have been assigned part-time. According to Rule S-1, the following guidelines are discussed for caseload:

> Caseload shall be determined, in the case of the instructional resource service, by the number of schools and the distance between schools served. In addition, if the teacher is not assigned to a full-time special education position, the caseload shall be adjusted accordingly.

11.7 CLASS SIZE

Class size is the number of students appropriately assigned to a given self-contained classroom teacher. According to Rule S-1, the following guidelines are discussed for class size:

> Class sizes and caseloads shall be limited in number to allow the teacher to meet the individual needs of each student enrolled as specified in the student's individualized education program.
>
> The class size and caseload shall be determined by:
>
> 1. The severity of the handicapping conditions of the children to be enrolled

2. The types and intensity of instruction needed

2. The children's ages

2. The availability of paraprofessionals

2. The related services to be provided outside the classroom by other personnel

11.8 COMBINATION CLASSES

Combination classes shall serve only one exceptionality area but may be composed of students from more than one level. Primary-intermediate, and intermediate-middle/junior high classes shall include students whose ages span a range of no more than five years. Middle/junior high-senior high classes shall include students whose ages span a range of no more than seven years.

11.9 EDUCATION EVALUATION

An education evaluation is a *procedure* utilized to determine whether a student is handicapped and the nature and extent of the special education and related services that the student needs. Procedures are used selectively with an individual student and do not include basic tests administered to, or procedures used with, all students in a school, grade, or class.

An educational evaluation shall consider information concerning physical condition, social or cultural background, and adaptive behavior and shall include information from a variety of sources including aptitude and achievement tests and teacher recommendations. The educational evaluation is made by a multidisciplinary team, including appropriately trained and certified school psychologists/psychometrists, and at least one teacher or other specialist with knowledge in the area of suspected disability.

The evaluation report shall include at least three components:

1. a comprehensive assessment of basic academic skill areas;

2. a description of how the student processes information on the basis of systematic observation in the present setting;

3. suggestions regarding appropriate task levels.

11.10 FREE APPROPRIATE PUBLIC EDUCATION (FAPE)

Those regular, special education and related services which:

1. are provided at public expense, under public supervision and direction, and without charge;

2. meet the standards of the state educational agency including the requirements of this rule;

3. include all education programs for students mandates or authorized under Indiana statutes;

4. are provided in conformity with an individualized education program which meets the requirements of this rule; and

5. include the variety of programs and services available to nonhandicapped students, including, but not limited to: art, music, industrial arts, consumer and homemaking education, and vocational education.

In addition, the provision of a free appropriate public education includes the provision of nonacademic and extracurricular services and activities in such manner as is necessary to afford handicapped students in equal opportunity for participation in those services and activities. These activities and services include but are not limited to: counseling services, athletics, transportation, health services, recreational activities, special interest groups or clubs sponsored by the school, referrals to agencies which provide assistance to handicapped persons, and later employment, including both employment by the school and assistance in making outside employment available.

Physical education services, specially designed if necessary, must be made available to every handicapped student receiving a free appropriate public education.

11.11 HANDICAPPED STUDENT

A handicapped student is any student as defined in Indiana statutes, (I.C. 10-1-6-1), unless stated in Rule S-1.

11.12 HOMEBOUND INSTRUCTION

Homebound and/or school-home telephone programs provide instruction to students unable to attend school because of physical handicaps or special health problems. Homebound teaching shall be initiated only after all other possibilities have been exhausted, with the goal of providing free appropriate public education for all students, regardless of the physical limitation.

To be eligible for homebound instruction, documentation from a physician as to the need for the homebound instruction shall be on file with the school having jurisdiction over the student. The statement of the physician must indicate the student will be homebound for at least four weeks, or less than four weeks at the close of the school year, enabling the student to complete the regular school work.

School-home telephone and homebound instruction may be offered concurrently.

11.13 INDEPENDENT HEARING OFFICER

An independent hearing officer is an individual appointed by the State Superintendent of Public Instruction to conduct a hearing. The individual shall not be an officer, employee, or agent of the school, the local board of education, or the State Department of Public Instruction, and shall have no personal or professional interest which would conflict with his/her objectivity in the hearing. The Department of Public Instruction shall keep a list of the individuals who serve as hearing officers which includes the qualifications of each of those persons.

11.14 INDIVIDUALIZED EDUCATION PROGRAM (IEP)

An individualized education program is a written plan developed by a case conference committee and maintained by the school which shall include the following:

1. A statement of the student's present levels of education performance
2. A statement of annual goals, including short-term instructional objectives
3. A statement of the specific special education and related services to be provided to the student and the extent to which the student will be able to participate in regular educational programs
4. The projected dates for initiation of services and the anticipated duration of the services

5. The appropriate objective criteria and evaluation procedures and schedules for determining, at least on an annual basis, whether the short-term instructional objectives are being achieved

11.15 INSTRUCTIONAL RESOURCE SERVICE

Instructional resource service is that service offered to identified students enrolled in regular programs or special programs. This part-time special instruction shall be performed by appropriately licensed personnel and shall be in areas of need as identified by the case conference committee.

11.16 LEAST RESTRICTIVE ENVIRONMENT (LRE)

The educational placement of a handicapped student which is appropriate to meet his/her identified needs and approximates, as closely as possible, the educational placement of the nonhandicapped students of comparable age and/or functional ability.

11.17 LEVELS OF CLASSES

1. Prekindergarten, ages: 3 through 5
2. Kindergarten, ages: 5 through 7
3. Primary, ages: 6 through 10
4. Intermediate, ages: 9 through 13
5. Middle/junior high, ages: 11 through 16
6. Senior high, ages: 14 through 21

11.18 LICENSED PERSONNEL

All special education programs shall be staffed by appropriate personnel who hold licenses for their special work as promulgated by the Indiana Teacher Training and Licensing Commission or an appropriate Indiana licensing agency.

11.19 LOCAL EDUCATION AGENCY (LEA)

The school corporation providing free public special education and related services on a local or cooperative basis and under the rules and regulations of the State Education Agency.

11.20 MAINSTREAMING

The placement of a handicapped student into education programs with normal functioning students. There is *no* mention of the word mainstreaming in P.L. 94-142. This word has been developed in an effort to describe the term "least restrictive environment" which appears in P.L. 94-142. The *spirit* of least restrictive environment is commonly referred to as mainstreaming.

11.21 MEDICAL DIAGNOSIS

A written diagnosis and evaluation by a physician with an unlimited license to practice medicine.

11.22 NATIVE LANGUAGE

The language normally used by a student or student's parent. If the parent is blind or deaf, alternative methods such as braille or sign communication must be submitted. If the parent is a nonreader or if the native language is not known, written evidence shall be provided by the school that all required notices are translated orally or by other means to the parent and that the parent understands the content of the notices.

Evaluation for a student whose native language is not English shall be conducted in the student's native language or other mode of communication.

11.23 OCCUPATIONAL THERAPY (OT)

Occupational therapy refers to that service, provided through direct therapy and/or therapist-directed/teacher-implemented classroom programming, which evaluates and trains in the areas of gross and fine motor functioning, self-care, and sensory and perceptual-motor integration with the intent of strengthening the student's ability to function as independently as possible. In addition, the remedial techniques include the design, fabication and adaptation of materials, equipment and the educational environment.

11.24 PARAPROFESSIONALS—RESPONSIBILITIES IN SPECIAL EDUCATION PROGRAMS

Paraprofessionals under the direct supervision of an appropriately licensed teacher or speech-language pathologist assist students in areas that related to personal, social, and instructional needs. In addition, the paraprofessional may assist the teacher or speech-language pathologist in the preparation of instructional materials, in setting up and operating audiovisual equipment, and may help with other classroom and school activities.

11.25 PARENT

Parent refers to:

1. a natural or adoptive parent except those whose natural parental rights have been terminated or restricted in accordance with law;

2. a legal guardian, including a court-appointed temporary guardian of the person vested with legal custody;

3. a person in whose custody a juvenile has been placed;

4. a person granted custody in a child custody proceeding, including temporary custody;

5. a person acting in *loco parentis* an adult with whom the child is living (not to include a representative of an agency providing care for the child); or

6. a child-placing agency licensed by the State Department of Public Welfare or a Department of Public Welfare which has legal custody or wardship of the child.

11.26 PHYSICAL EDUCATION

Physical education includes special physical education, adapted physical education, movement education and motor development. Physical education is defined as the development of physical and motor fitness, fundamental motor skills and patterns, and skills in aquatics, dance and individual and group games and sports, including intramural and lifetime sports.

11.27 PHYSICAL THERAPY (PT)

Physical therapy refers to those habilitative and/or rehabilitative services, provided through direct therapy and/or consultation, which evaluate individual developmental levels, functional abilities, reflex level, range of motion, muscle strength, perceptual motor level, and respiratory function. Treatment objectives and programs are planned in accordance with evaluation results and are implemented by a licensed physical therapist.

The licensed physical therapist evaluates, recommends, and/or adapts assistive equipment. The therapist practices under the referral of a physician with an unlimited license to practice medicine.

11.28 PSYCHOLOGICAL SERVICES

Psychological services are those services provided by appropriately licensed and trained school psychologists or psychometrists including, but not limited to:

1. administering psychological and educational tests, and other assessment procedures;

2. interpreting assessment results;

3. obtaining, integrating, and interpreting information about student behavior and conditions related to learning;

4. consulting with school staff members and parents in planning school programs to meet the special needs of students as indicated by psychological test, interviews, and behavior evaluation; and

5. planning and managing a program of psychological services, including counseling for students and parents.

11.29 REGULAR CLASSES

Those classes offered to all students as part of the general sequential education program. These classes may be grade level classes, specialty areas, or electives.

11.30 RELATED SERVICES

Transportation and such developmental, corrective, and other supportive services as are required to assist a handicapped student to benefit from special education. Related services include audiology, psychological services, physical and occupational therapy, recreation, early identification and assessment of disabilities, counseling services, and medical services for diagnostic or evaluation purposes. The term also includes school health services, school social work services, and parent counseling and training in order to provide the parent with information about student development and assist the parent in understanding the special needs of the student.

11.31 SCHOOL

Any instructional area, used for instructional purposes, meeting school inspection requirements and administered by a recognized local education agency. "School" also includes the Indiana School for the Blind, Indiana School for the Deaf, Silvercrest Children's Development Center, and other state agency schools.

11.32 SPECIAL CLASSES

Those classes, other than regular classes, serving only one exceptionality area, where students with identified special educational needs are placed and which are deemed to be the least restrictive environment as stated in their individualized education programs as written by the case conference committee.

11.33 SPECIAL CONSULTATION

Those consultation services available and needed by all teachers in order to provide the least restrictive environment. Consultation services shall be provided by appropriately licensed or registered personnel, shall be related to the development and implementation of individualized education programs, and shall include initial and ongoing education assessment.

11.34 SPECIAL EDUCATION

Specifically designed instruction, including necessary related services, to meet the unique needs of a handicapped student, including classroom instruction, instruction in physical education, home instruction in hospitals and institutions.

11.35 SPECIALIST

The term specialist includes, but is not limited to: reading specialists; social psychologists; school psychometrists; school social workers and attendance workers; speech-language pathologists; medical doctors; school nurses; occupational therapists; physical therapists; community and/or state mental health staff; counselors, special education instructional staff utilized as resource specialists; and educational audiologists.

11.36 SPEECH PATHOLOGY

Those services provided by licensed speech-language pathologists:

1. The identification of students with speech or language disorders
2. Diagnosis and appraisal of specific speech or language disorders
3. Referral for medical or other professional attention necessary for the habilitation of speech or language disorders
4. Provision of speech and language services for the habilitation or prevention of communication disorders
5. Consultation and guidance of individual students, teachers and parents regarding speech and language disorders

11.37 STATE EDUCATION AGENCY (SEA)

In Rule S-1, the state education agency is the Indiana Department of Public Instruction.

11.38 SURROGATE PARENT

A surrogate parent may be appointed by a local education agency to assist in the representation of the student in matters pertaining to this Rule when the child is a ward of the state or when the child's

parents are unknown or unavailable. The surrogate parent assists the agency which has legal custody or wardship of the child in making education decisions about the child. A foster parent may be appointed to act as the foster child's surrogate parent.

11.39 TRANSPORTATION

Transportation includes:

1. Travel to and from school and between schools
2. Travel to and from related services as required for/by the student's individualized education program
3. Travel in and around school buildings
4. Specialized equipment (such as special or adapted buses, lifts, and ramps) if required to provide special transportation for a handicapped student

11.40 VOCATIONAL EDUCATION

Vocational education in its broadest sense refers to various methods of preparing students for the world of work. Specifically, it is used here to refer to a variety of educational programs including, but not necessarily limited to, vocational assessment, prevocational training, work study and on-the-job training, as well as industrial education and distributive education.

Section 12

Resources

12.1 Local Special Education Cooperative

12.2 State Special Education

12.3 Federal Special Education

Section 12

RESOURCES

12.1 LOCAL SPECIAL EDUCATION COOPERATIVE

Contact: Local Director of Special Education

_____

_____

_____

Contact: Local Superintendent of Schools

_____

_____

_____

(To fill in the names, address and phone numbers that are pertinent for you, contact your local school or the Indiana Department of Public Instruction, which is listed in 12.2.)

12.2 STATE SPECIAL EDUCATION

Contact:

Indiana Department of Public Instruction
Division of Special Education
Room 229, State House
Indianapolis, IN 46204
(317) 927-0216

Other State Agencies:

The Commission for the Handicapped
1330 West Michigan Street
Indianapolis, IN 46206
(317) 633-0286

Developmental Training Center
2853 East 10th Street
Bloomington, IN 47405
(812) 335-6508

Indiana Department of Mental Health
Division of Professional Services
429 N. Pennsylvania St.
Indianapolis, IN 46204
(317) 232-7829

Indiana Department of Public Welfare
Division of Services for Crippled Children
100 North Senate Avenue
Indianapolis, IN 46204
(317) 232-4280

Indiana Rehabilitative Services
Division of Vocational Rehabilitation
1001 Illinois Building
17 West Market Street
Indianapolis, IN 46204
(317) 232-1663

Indiana School for the Blind
7725 North College Avenue
Indianapolis, IN 46204
(317) 253-1481

Indiana School for the Deaf
1200 East 42nd Street
Indianapolis, IN 46205
(317) 924-4374

Indiana State Board of Health
Division of the Handicapped
1330 West Michigan Street
Indianapolis, IN 46204
(317) 633-0286 or (317) 633-0289

Protection & Advocacy Service Commission
for the Developmentally Disabled
Room 503
445 North Pennsylvania Street
Indianapolis, IN 46204
(317) 232-1150 toll free (800) 622-4845

Silvercrest Children's Development Center
Old Vincennes Road
P.O. Box 500
New Albany, IN 47150
(812) 945-5287

12.3 FEDERAL SPECIAL EDUCATION

Association for Children with Learning Disabilities
4156 Library Road
Pittsburgh, PA 15234
(412) 341-1515

Council for Exceptional Children
1920 Association Drive
Reston, VA 22091

National Association Retarded Citizens, Inc.
2501 Avenue J
P.O. Box 6109
Arlington, TX 76010
(817) 640-0204

National Association of State Directors of Special Education
Suite 610-E
1201 16th Street N.W.
Washington, DC 20036
(202) 833-4218

National Inservice Network/Indiana Comprehensive System of Personal Development
Indiana University
2853 East 10th Street, Cottage L
Bloomington, IN 47405
(812) 335-2734